



Department of Veterans Affairs

BATH VA MEDICAL CENTER 76 VETERANS AVENUE, BATH NY 14810 PROJECT #528A6-14-601 UPGRADE FIRE ALARM SYSTEM BUILDING 76

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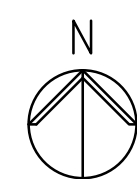
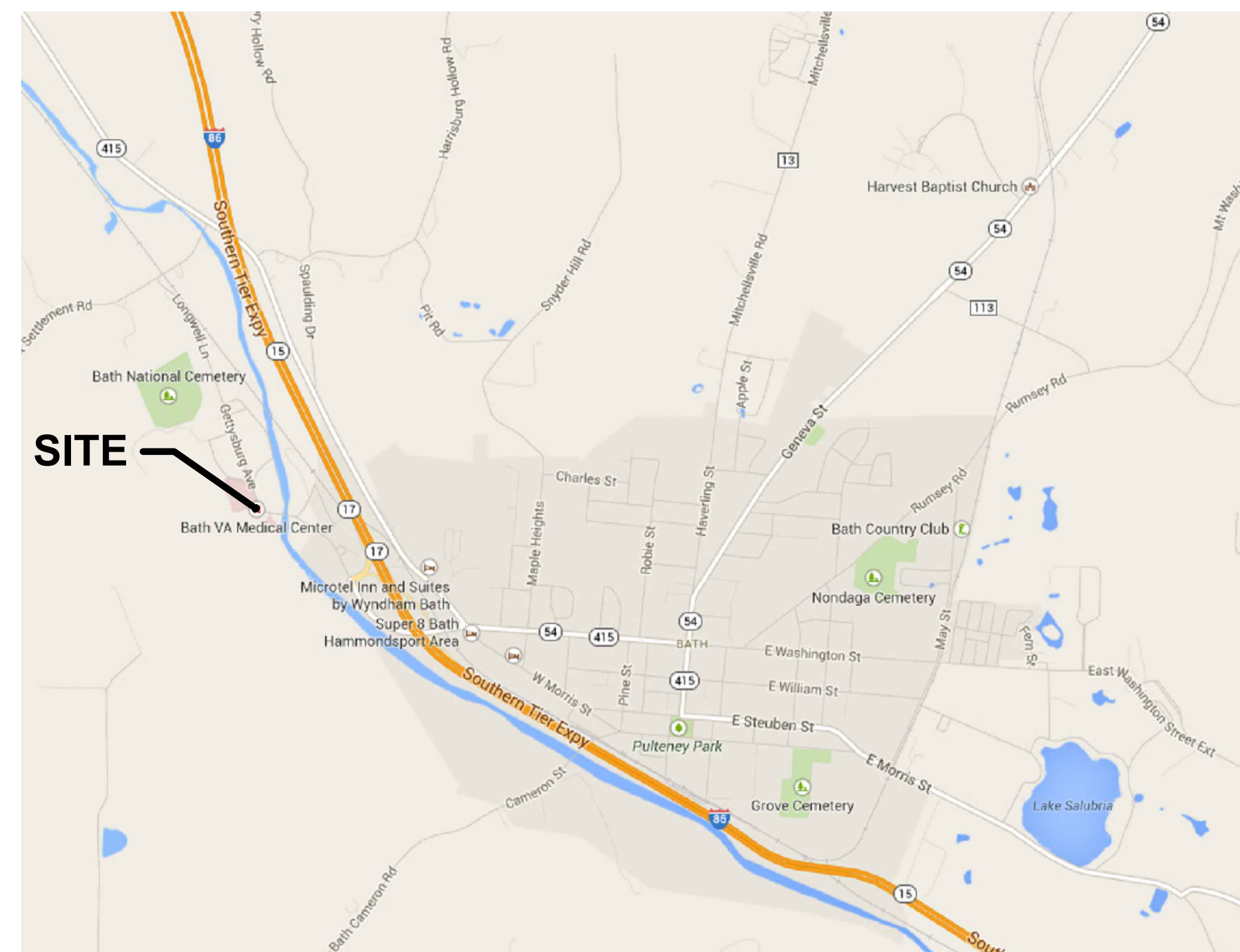
FA601 FIRE ALARM RISER DIAGRAM AND INPUT/OUTPUT MATRIX

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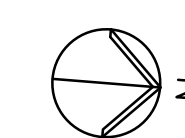
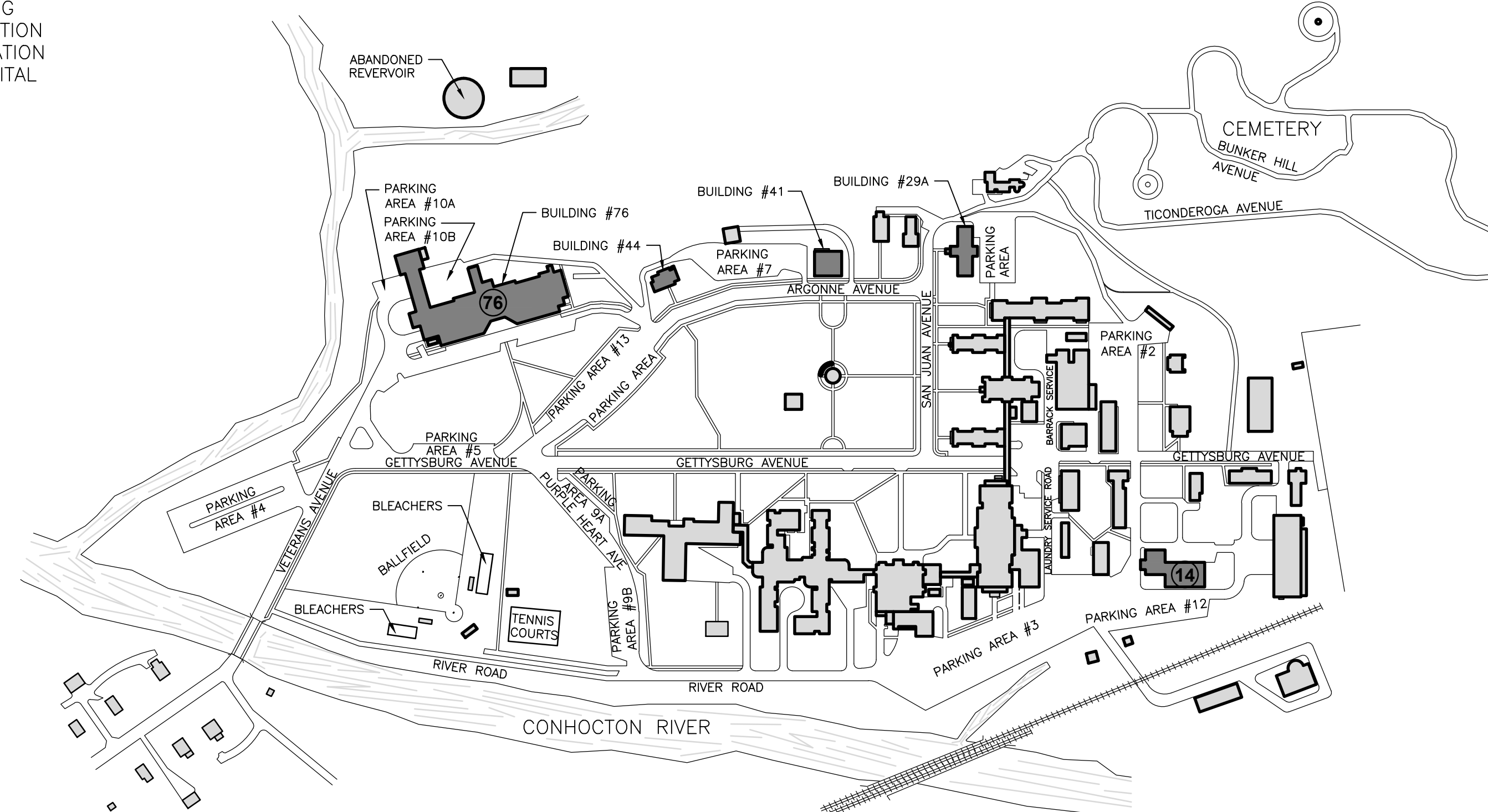
PROJECT LOCATION MAP



PROJECT SITE MAP

BUILDING SCHEDULE

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29A ENGINEERING
41 ADMINISTRATION
44 POLICE STATION
76 MAIN HOSPITAL



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ARCHITECT/ENGINEERS:

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Approved: Associate Director Date

Drawing Title
COVER SHEET

Approved: Eng. Project Supervisor Date

Approved: Medical Center Director Date

Project Title
UPGRADE FIRE ALARM
SYSTEM BUILDING 76

Building No.
76

Checked
WLM

Drawn
MMF

Location
BATH, NEW YORK

Date
06-27-2014


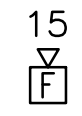
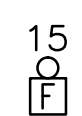
























Project No.
528A6-14-601

DRAWING NO.
VAMC-528A6-0012



GI001
Dwg. 1 of 32

LEGEND

FIRE ALARM

	FIRE ALARM PULL STATION. MOUNTED 48" AFF TO CENTERLINE OF STATION.
	AUDIO/VISUAL ALARM. COMBINATION SPEAKER WITH ADJUSTABLE CANDELA STROBE LIGHT. WALL MOUNTED 90" AFF TO TOP. CEILING MOUNT WHERE INDICATED. NUMBER INDICATES CANDELA RATING OF STROBE. 'WP' INDICATES WEATHERPROOF UNIT.
	VISUAL ALARM. ADJUSTABLE CANDELA STROBE LIGHT. WALL MOUNTED 90" AFF TO TOP. CEILING MOUNT WHERE INDICATED. NUMBER INDICATES CANDELA RATING OF STROBE. REFER TO SPECIAL REQUIREMENTS IN SLEEPING AREAS. NS INDICATES NON-SUPERVISED 120 VOLT REMOTE VISUAL SIGNAL, 177 CANDELA, CONNECTED TO NON-SUPERVISED SMOKE DETECTOR.
	CEILING MOUNTED SPEAKER (AUDIO ALARM)
	WALL MOUNTED SPEAKER (AUDIO ALARM)
	WALL MOUNTED BELL
	PHOTOELECTRIC SMOKE DETECTOR WITH ADDRESSABLE BASE. CEILING MOUNTED.
	COMBINATION SMOKE DETECTOR AND AUDIO/VISUAL ALARM. ADJUSTABLE CANDELA STROBE, CEILING MOUNTED.
	HEAT DETECTOR. CEILING MOUNTED.
	DUCT MOUNTED SMOKE DETECTOR WITH TEST AND RESET. FURNISHED AND WIRED BY ELECTRICAL CONTRACTOR, INSTALLED BY MECHANICAL CONTRACTOR. 'S' INDICATES LOCATED IN SUPPLY AIR DUCT 'R' INDICATES LOCATED IN RETURN AIR DUCT
	REMOTE TEST STATION AND INDICATOR LIGHT WITH RESET FOR DUCT SMOKE DETECTOR
	REMOTE INDICATOR
	MONITOR MODULE
	CONTROL MODULE
	SMOKE DAMPER CONNECTION
	SPRINKLER FLOW SWITCH
	SPRINKLER LOW PRESSURE SWITCH
	SPRINKLER VALVE TAMPER SWITCH
	NOTIFICATION APPLIANCE EXTENDER
	FIRE ALARM CONTROL PANEL
	FIRE ALARM TERMINAL CABINET
	FIRE ALARM ANNUNCIATOR
	FIREFIGHTERS EMERGENCY PHONE JACK
	SIAMESE CONNECTION
	POST INDICATOR VALVE (P.I.V.)
	FIRE SHUTTER
	FIRE DOOR SHUTTER

OTHER

	FIRE PARTITION
	SMOKE PARTITION

ABBREVIATIONS

A	AMP	MIC	MICROWAVE OR MICROPHONE
AC	ALTERNATING CURRENT	NC	NORMALLY CLOSED OR NURSE CALL
ADA	AMERICANS WITH DISABILITIES ACT	NEC	NATIONAL ELECTRICAL CODE
AFF	ABOVE FINISHED FLOOR	NFPA	NATIONAL FIRE PROTECTION ASSOCIATION
AFG	ABOVE FINISHED GRADE	NO	NORMALLY OPEN
AWG	AMERICAN WIRE GAUGE	NO.	NUMBER
BLDG	BUILDING	PA	PUBLIC ADDRESS
C	CONDUIT	PB	PUSH BUTTON
CLG	CEILING	PNL	PANEL
CH	CHANNEL	PVC	POLYVINYL CHLORIDE
CKT	CIRCUIT	REF	REFRIGERATOR
CL	CENTERLINE	RSC	RIGID STEEL CONDUIT
CMU	CONCRETE MASONRY UNIT	RTU	ROOF TOP UNIT
CONC	CONCRETE	SF	SUPPLY FAN
CONT'D	CONTINUED	SS	SOLID STATE
COR	CONTRACTING OFFICER'S REPRESENTATIVE	SWBD1	SWITCHBOARD, NUMBER AS INDICATED
CU	COPPER	TYP	TYPICAL
CUH	CABINET UNIT HEATER	TV	TELEVISION
DC	DIRECT CURRENT	UG	UNDERGROUND
DW	DISH WASHER	UL	UNDERWRITERS LABORATORIES
EC	ELECTRICAL CONTRACTOR	UPS	UNINTERRUPTIBLE POWER SUPPLY
EF	EXHAUST FAN	V	VOLT
EGC	EQUIPMENT GROUNDING CONDUCTOR	VA	DEPARTMENT OF VETERAN AFFAIRS
EOL	END OF LINE	VA	VOLT-AMPERE
EUH	ELECTRIC UNIT HEATER	VAMC	VA MEDICAL CENTER
EWC	ELECTRIC WATER COOLER	VOIP	VOICE OVER INTERNET PROTOCOL
FACP	FIRE ALARM CONTROL PANEL	W	WATT
GD	GARBAGE DISPOSAL	W/	WITH
GEC	GROUNDING ELECTRODE CONDUCTOR	WP	WEATHERPROOF
GFI	GROUND FAULT INTERRUPTER	WRG	WIRING
GND	GROUND	XFMR	TRANSFORMER
HP	HORSEPOWER	XP	EXPLOSION-PROOF
HZ	HERTZ	(R)	LOCATION OF RELOCATED DEVICE OR EQUIPMENT
JB	JUNCTION BOX	(RR)	REMOVE AND RELOCATE EXISTING DEVICE OR EQUIPMENT
KCMIL	THOUSAND CIRCULAR MIL	(RX)	REMOVE EXISTING DEVICE OR EQUIPMENT
KV	THOUSAND VOLTS (KILOVOLT)	(X)	EXISTING DEVICE OR EQUIPMENT TO REMAIN
KVA	THOUSAND VOLT-AMPS	(XR)	EXISTING DEVICE OR EQUIPMENT TO BE REMOVED AND REPLACED AT SAME LOCATION
KW	THOUSAND WATTS (KILOWATT)		
LED	LIGHT EMITTING DIODE		
LTG	LIGHTING		
MCC	MOTOR CONTROL CENTER		
MCCB	MOLDED CASE CIRCUIT BREAKER		
MCB	MAIN CIRCUIT BREAKER		
MH	MANHOLE		

GENERAL NOTES

- NOT ALL SYMBOLS INDICATED IN THE LEGEND, OR LISTED ABBREVIATIONS, APPEAR ON THE DRAWINGS. COORDINATE WORK ACCORDINGLY. COMPLY WITH SPECIFICATIONS AND NOTES BELOW AS APPLICABLE.
- DASHED SYMBOLS INDICATE ITEMS THAT ARE BEING COMPLETELY REMOVED.
- ALL PENETRATIONS THROUGH FLOORS, RATED WALLS AND PARTITIONS SHALL BE SEALED WITH UL APPROVED FIRE SEALANT MATERIAL TO MAINTAIN FIRE AND/OR SMOKE RATING FOR THE SEPARATION. REFER TO SPECIFICATIONS.
- ALL CONDUITS, ENCLOSURES, CONDUIT BODIES AND THEIR COVERS CONTAINING FIRE ALARM SYSTEM CONDUCTORS SHALL BE PAINTED RED.
- ALL NEW CONDUIT, WIRE, AND CABLES SHALL BE CONCEALED IN WALLS, CEILING SPACES, ELECTRICAL SHAFTS, OR CLOSETS. NEW CONDUIT SHALL ONLY BE EXPOSED IN UNFINISHED AREAS.
- PROVIDE WIRE MARKERS TO IDENTIFY CABLES FOR ALL SYSTEMS AT THE ORIGIN, PULL BOXES, AND TERMINATION POINTS. LABELS SHALL BE SELF ADHESIVE OR HEAT SHRINK TYPE. REFER TO SPECIFICATIONS.
- SOME WORK UNDER THIS CONTRACT WILL REQUIRE WORK DUTIES TO BE PERFORMED AFTER NORMAL WORKING HOURS. DETERMINATION OF SPECIFIC WORK DUTIES TO BE PERFORMED AFTER HOURS MUST BE MADE BY VA STAFF AT THEIR CONVENIENCE. POSSIBLE WORK REQUIRING AFTER HOURS APPROVAL INCLUDES: POWER OUTAGES AND DISRUPTION OF SERVICES, EXTREME NOISE AND/OR VIBRATION, CUTTING AND PATCHING OF CONCRETE, AND DELIVERIES OF EQUIPMENT.
- EXISTING FIRE ALARM CONDUIT AND BOXES SHALL BE REUSED WHEREVER POSSIBLE TO AVOID DAMAGE TO THE EXISTING STRUCTURE AND FINISHES SO LONG AS DRAWING AND SPECIFICATION REQUIREMENTS CAN BE MET. ALL REUSED CONDUIT SHALL HAVE ALL ACCESSIBLE FITTINGS TIGHTENED AND PROPERLY ANCHORED, INCLUDING INSTALLING NEW FITTINGS, HANGERS, OR OTHER SUPPORTS.
- ALL DEMOLITION WORK SHALL COMPLY WITH MEDICAL CENTER REQUIREMENTS AND PROCEDURES.
- UNLESS NOTED, OR OTHERWISE SHOWN OR SPECIFIED, ALL MATERIALS AND EQUIPMENT REMOVED OR DEMOLISHED (EXCEPT THAT WHICH IS TO BE SALVAGED OR RELOCATED) AS DIRECTED BY DRAWINGS AND SPECIFICATIONS SHALL BECOME THE PROPERTY OF THE CONTRACTOR AND SHALL BE DISPOSED OF LEGALLY.
- CARE SHOULD BE TAKEN BY ALL CONTRACTORS TO AVOID DAMAGING OR DISTURBING EXISTING CONSTRUCTION AND FINISHES. CONTRACTORS SHALL BE RESPONSIBLE FOR MAKING ANY REPAIRS NECESSARY TO RECTIFY DAMAGE AND RESTORE EXISTING CONSTRUCTION AND FINISHES TO UNDAMAGED STATE UPON COMPLETION OF WORK AT NO EXPENSE TO THE VA. REPAIR OR REPLACE AND REFINISH, TO THE SATISFACTION OF THE VA, ANY CEILING, FLOOR, OR WALL SURFACES OR STRUCTURES THAT MAY BE DAMAGED IN THE PROCESS OF WORK.

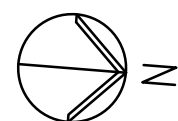
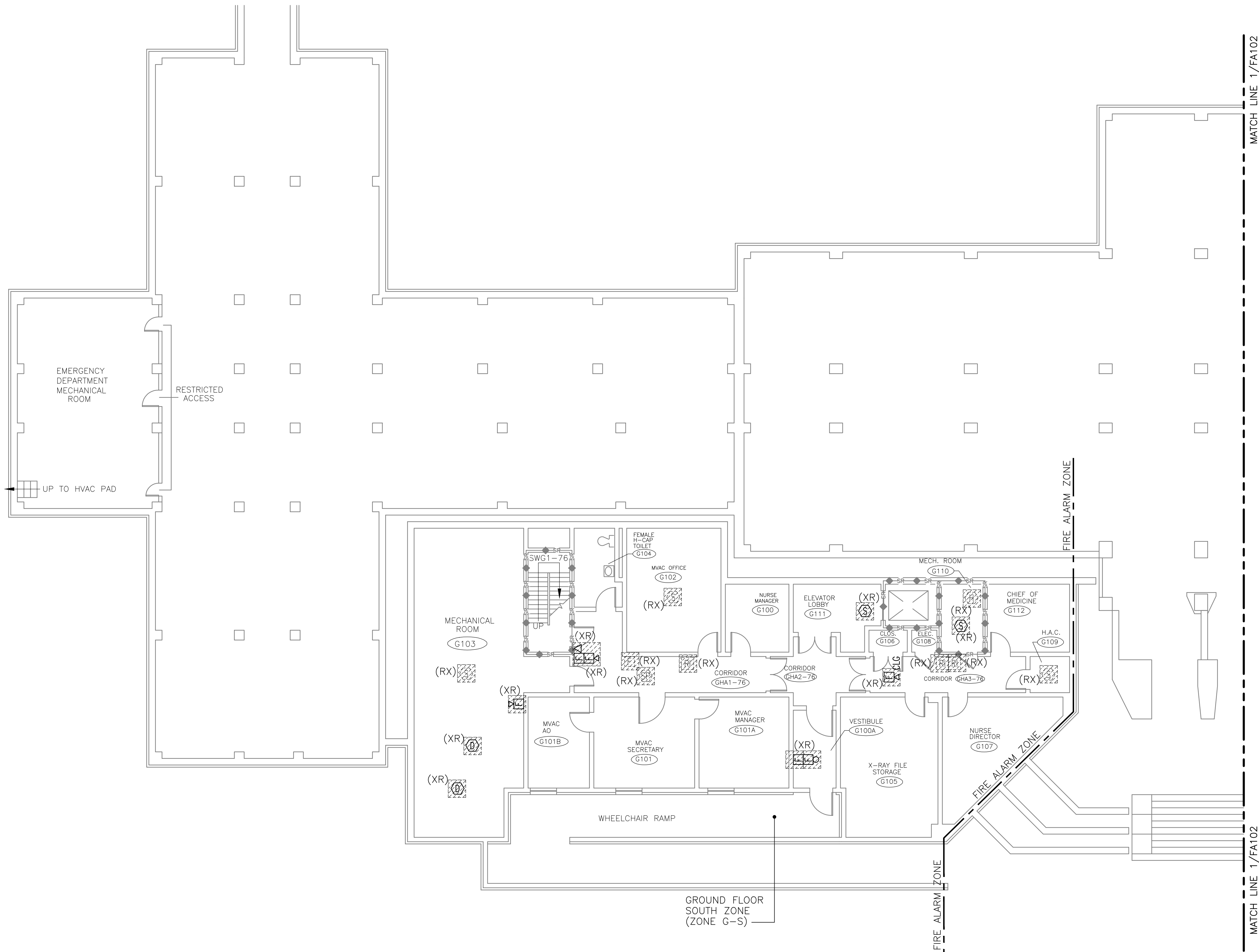
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<div>Revisions</div>	<div>Date</div>	<div>ARCHITECT/ENGINEERS: <div>PARADIGM</div><div>ENGINEERS AND CONSTRUCTORS</div><div>200 Envoy Circle #201, Louisville KY 40299 ~ PH: 502.339.8511 ~ www.paradigmusa.com</div></div>	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. _____ Date _____	Approved: Fire Chief _____ Date _____	Approved: Patient Safety _____ Date _____	<div>Drawing Title FIRE ALARM LEGEND, ABBREVIATIONS, AND GENERAL NOTES</div>	<div>Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76</div>	<div>Date 06-27-2014</div>	<div>Project No. 528A6-14-601</div>	<div>DRAWING NO. VAMC-528A6-0012 FA001 Dwg. 2 of 32</div>							
			Approved: Logistics Manager. _____ Date _____	Approved: Interior Designer _____ Date _____	Approved: Safety Officer _____ Date _____	Approved: M&R Foreman _____ Date _____												
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																Approved: Eng. Project Supervisor _____ Date _____	<div>Building No. 76</div> <div>Checked WLM</div> <div>Drawn MMF</div>	
																Approved: Medical Center Director _____ Date _____		<div>Location BATH, NEW YORK</div>

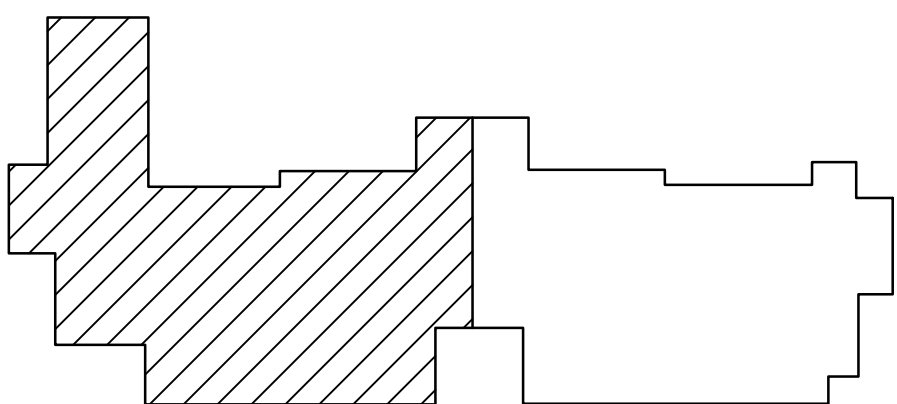
V.A.

GENERAL FIRE ALARM DEMOLITION PLAN NOTES

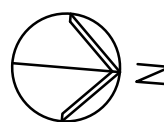
- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
- B. RENOVATION NOTATIONS:
- (RX) REMOVE EXISTING DEVICE OR EQUIPMENT
(XR) EXISTING DEVICE OR EQUIPMENT TO BE REMOVED AND REPLACED AT SAME LOCATION
- C. FIRE ALARM DEVICES SHOWN SHALL BE DISCONNECTED AND REMOVED, REFER TO NEW DRAWINGS FOR FURTHER INFORMATION.



1 PARTIAL FLOOR PLAN
1/8" = 1'-0"

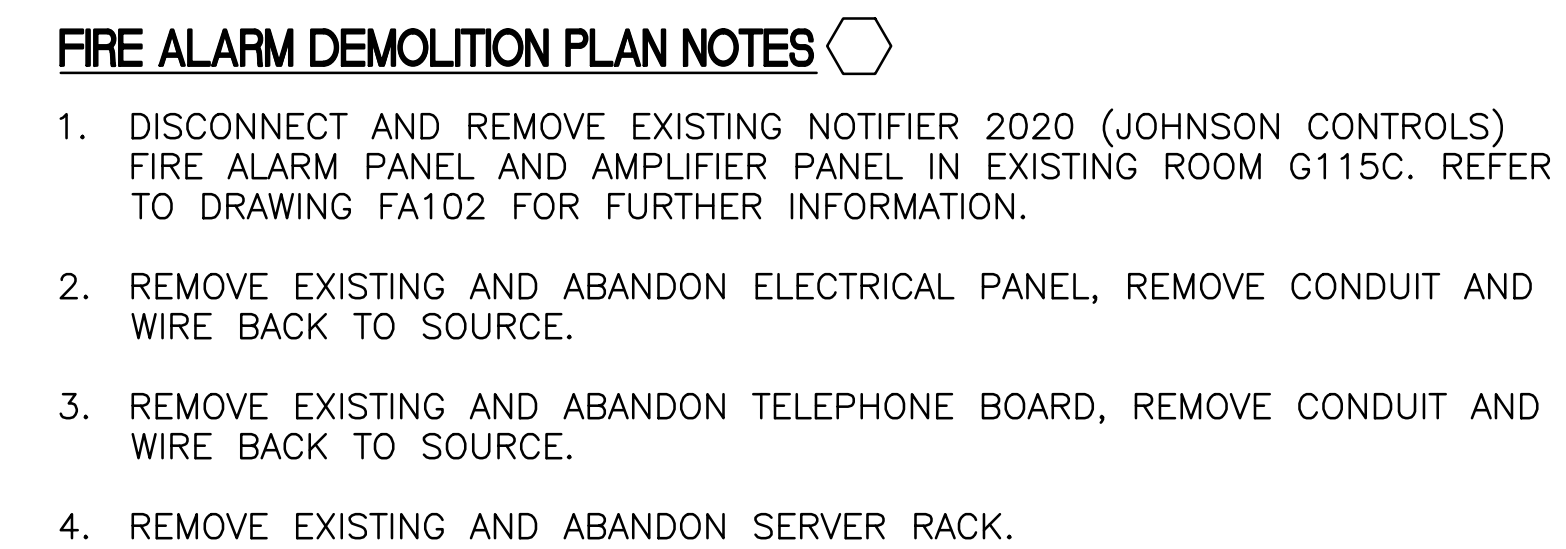


KEY PLAN
NTS



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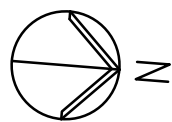
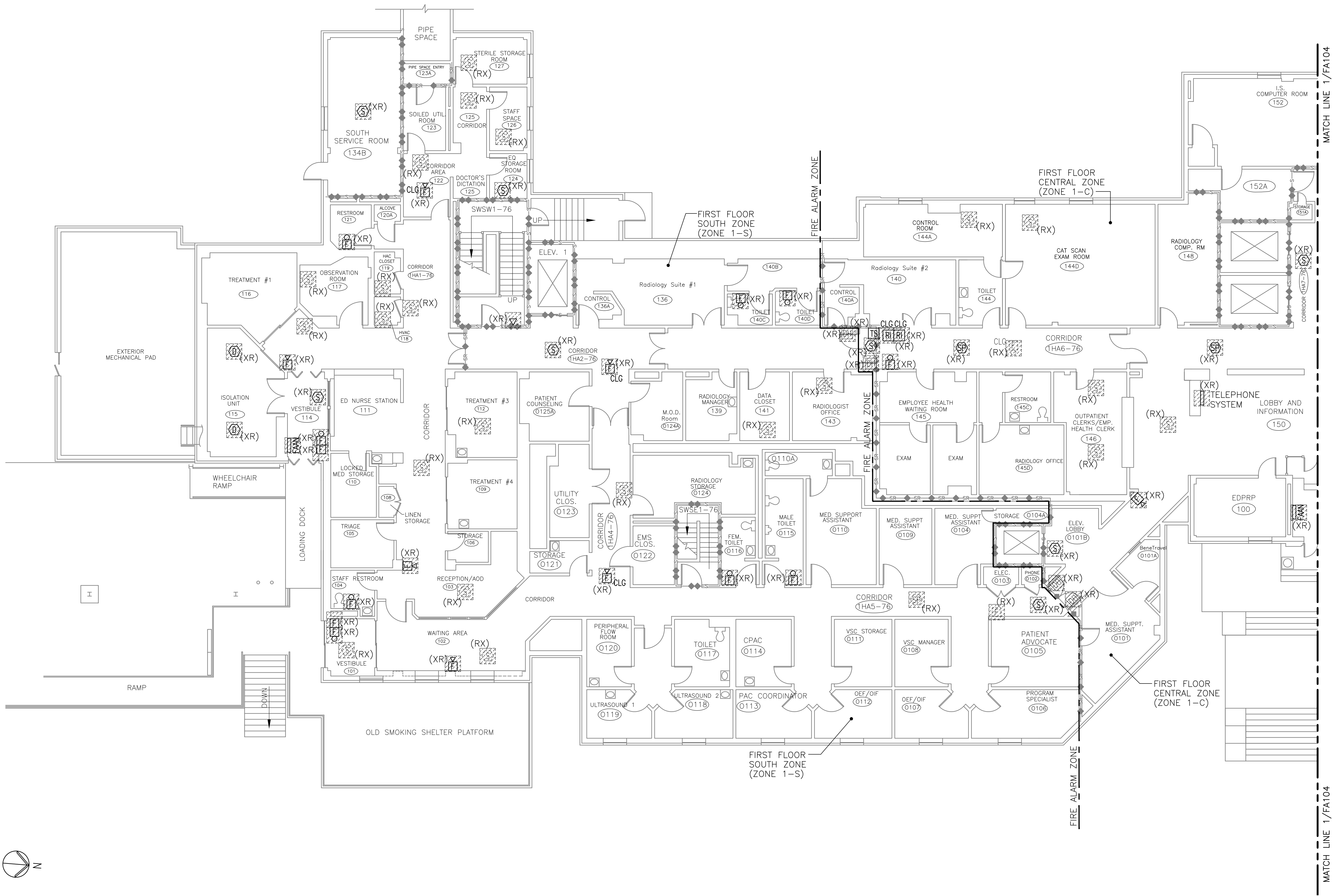
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Revisions	Date						Approved: Medical Center Director _____ Date _____			Building No. 76		Checked WLM	Drawn MMF	Dwg. 4 of 32
Location BATH, NEW YORK														

GENERAL FIRE ALARM DEMOLITION PLAN NOTES

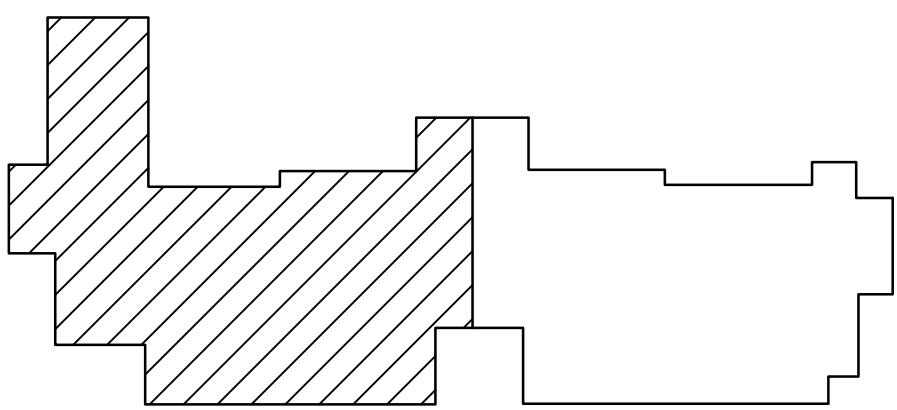
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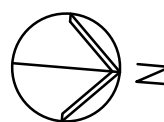
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1/8" = 1'-0"



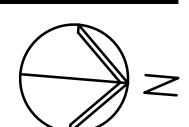
KEY PLAN
NTS




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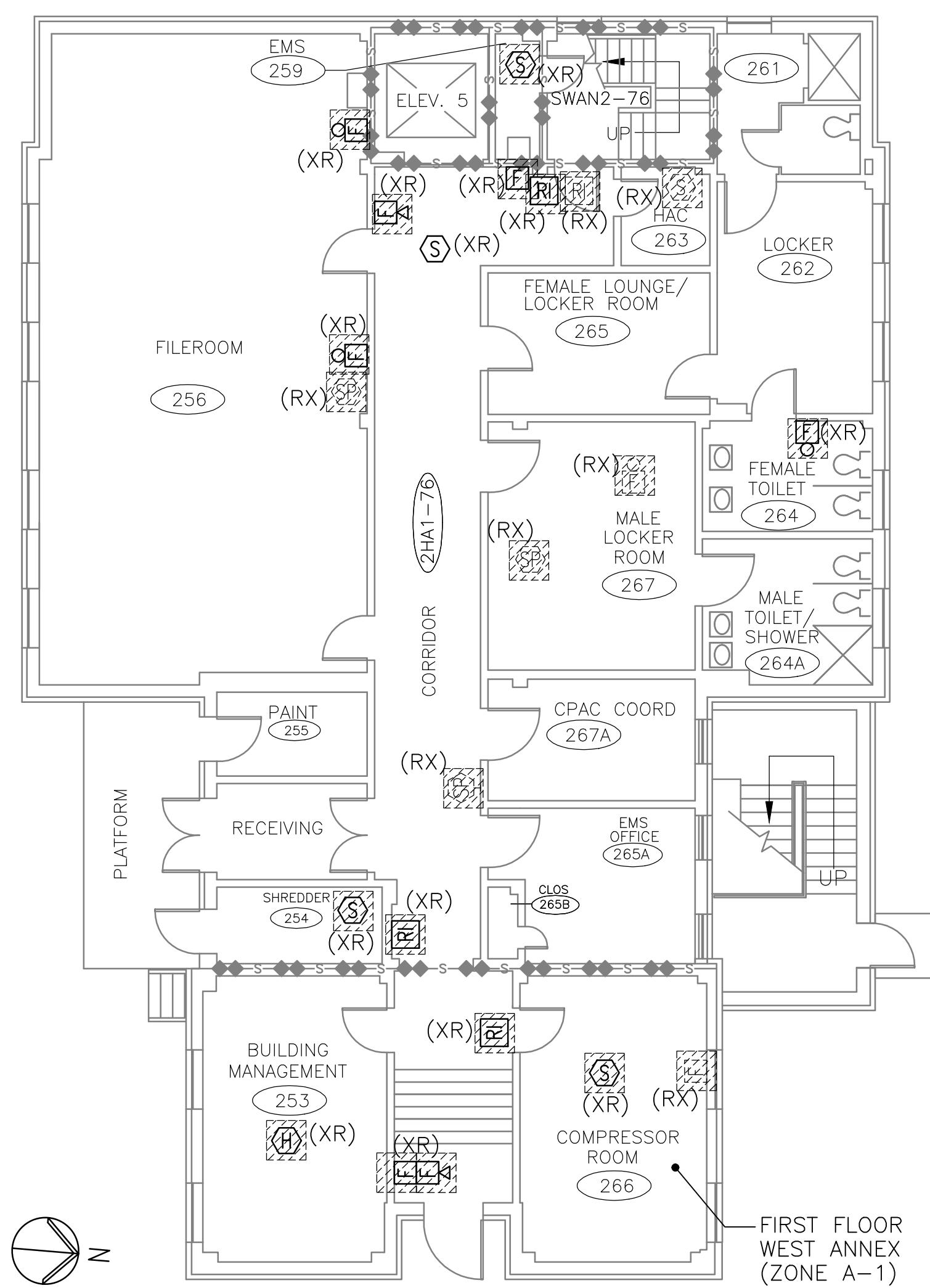
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									Dwg. 5 of 32	

(RX) REMOVE EXISTING DEVICE OR EQUIPMENT
(XR) EXISTING DEVICE OR EQUIPMENT TO BE REMOVED AND REPLACED AT
SAME LOCATION

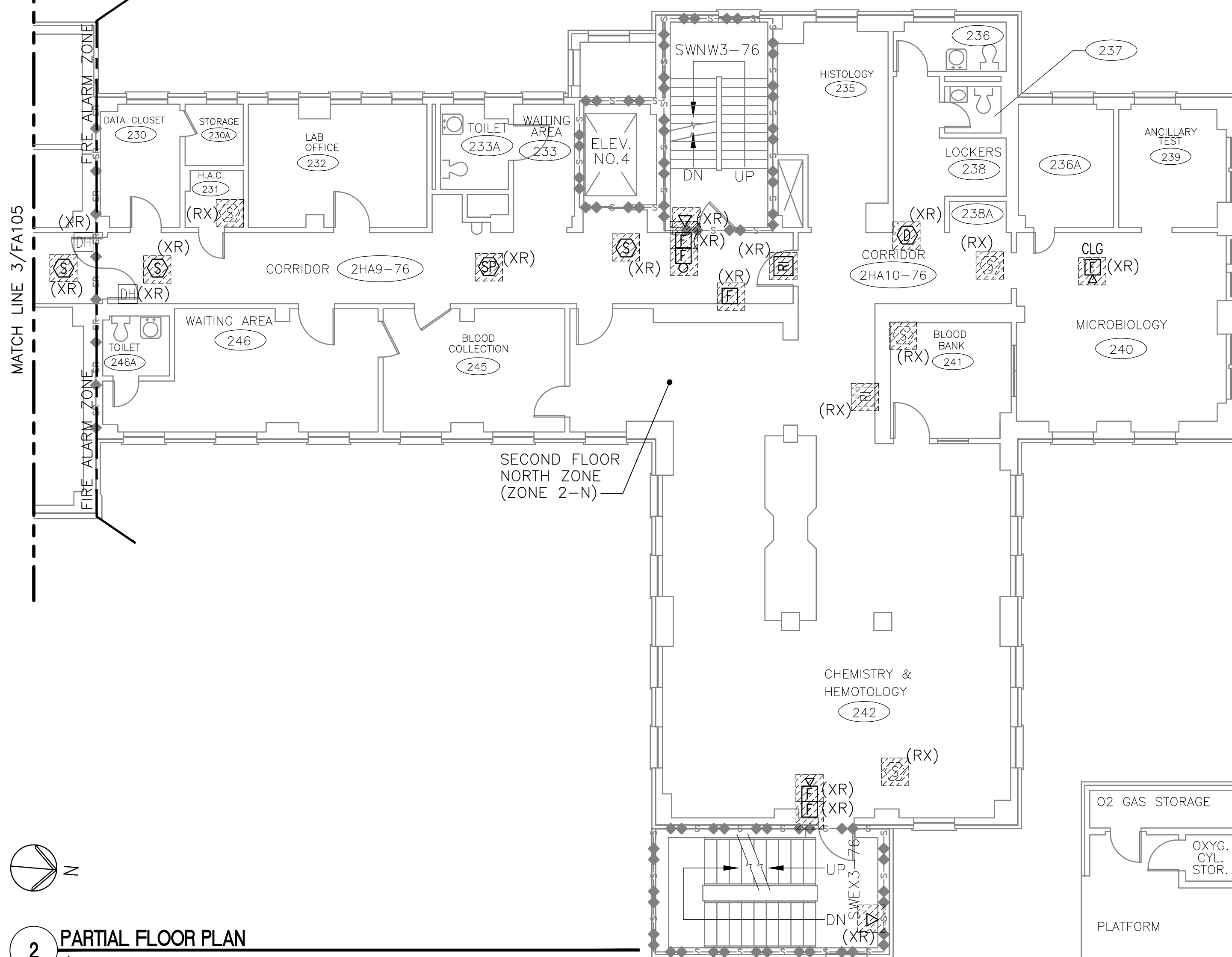


FD104
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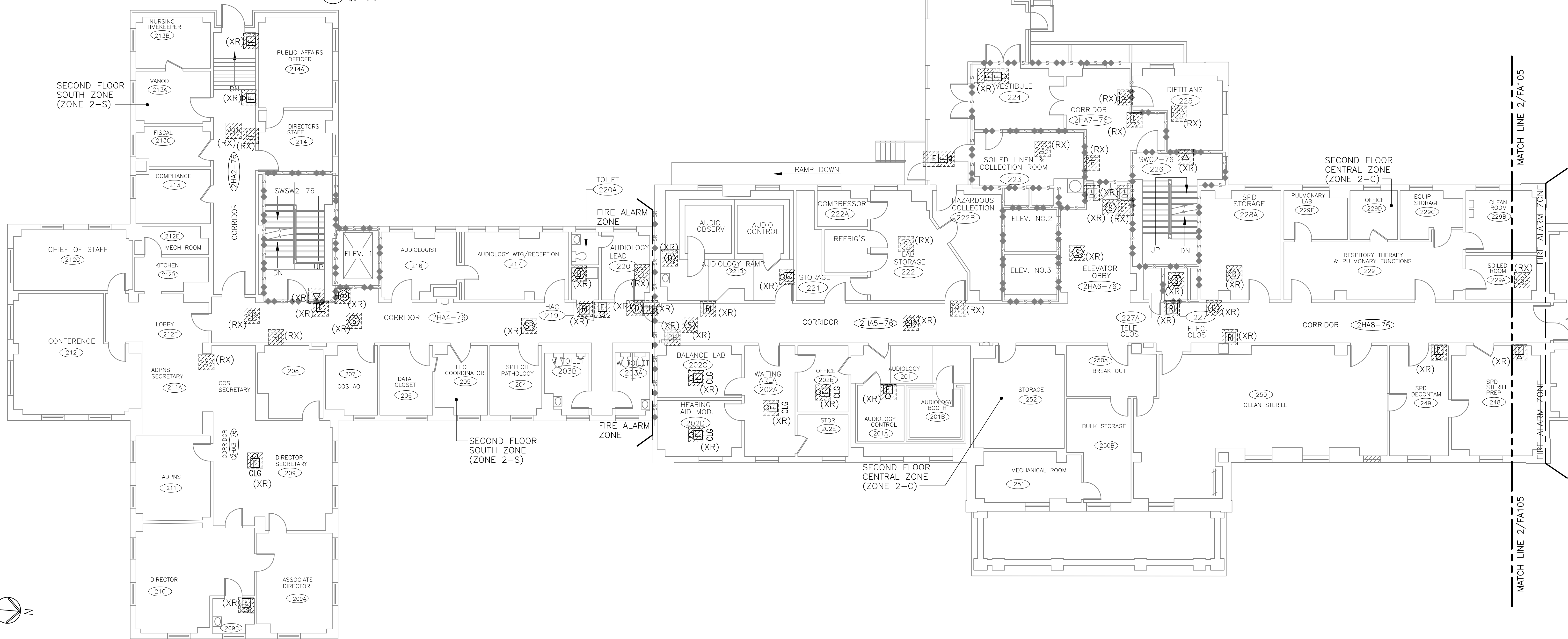
	ARCHITECT/ENGINEERS: <div> PARADIGM ENGINEERS AND CONSTRUCTORS</div> <div>200 Envoy Circle #201, Louisville KY 40299 - PH: 502.339.8511 - www.paradigmusa.com</div>	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. Date	Approved: Fire Chief Date	Approved: Patient Safety Date	Drawing Title FIRE ALARM DEMOLITION / REPLACEMENT FIRST FLOOR NORTH	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	Project No. 528A6-14-601	DRAWING NO. VAMC-528A6-0012 FD104 Dwg. 6 of 32	A	
		Approved: Logistics Manager. Date	Approved: Interior Designer Date	Approved: Safety Officer Date	Approved: M&R Foreman Date	Approved: Eng. Project Supervisor Date	Building No. 76	Checked WLM				Drawn MMF
		Approved: Infection Control Mgr. Date	Approved: Info. Sys. Date	Approved: Industrial Hygienist Date	Approved: Industrial Hygienist Date	Approved: Medical Center Director Date	Location BATH, NEW YORK					
		Approved: Chief Security Date	Approved: Women's Health Rep Date	Approved: Space Owner Date	Approved: Associate Director Date							



1 WEST ANNEX - FLOOR PLAN
1/8" = 1'-0"



2 PARTIAL FLOOR PLAN
1/8" = 1'-0"



3 PARTIAL FLOOR PLAN
1/8" = 1'-0"

GENERAL FIRE ALARM DEMOLITION PLAN NOTES

- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
- B. RENOVATION NOTATIONS:
- (RX) REMOVE EXISTING DEVICE OR EQUIPMENT
- (XR) EXISTING DEVICE OR EQUIPMENT TO BE REMOVED AND REPLACED AT SAME LOCATION

ARCHITECT/ENGINEERS:



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CODES & O.S.H.A.

Approved: Logistics Manager. Date

Approved: Infection Control Mgr. Date

Approved: Chief Security Date

Approved: A.F.G.E. Date

Approved: Interior Designer Date

Approved: Info. Sys. Date

Approved: Women's Health Rep Date

Approved: Fire Chief Date

Approved: Safety Officer Date

Approved: Industrial Hygienist Date

Approved: Space Owner Date

Approved: Patient Safety Date

Approved: M&R Foreman Date

Approved: Industrial Hygienist Date

Approved: Associate Director Date

Drawing Title
FIRE ALARM
DEMOLITION / REPLACEMENT
SECOND FLOOR

Approved: Eng. Project Supervisor Date

Approved: Medical Center Director Date

Project Title
UPGRADE FIRE ALARM
SYSTEM BUILDING 76

Building No.
76

Location
BATH, NEW YORK

Checked
WLM

Drawn
MMF

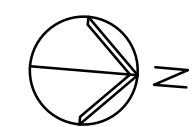
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06-27-2014

Project No.
528A6-14-601

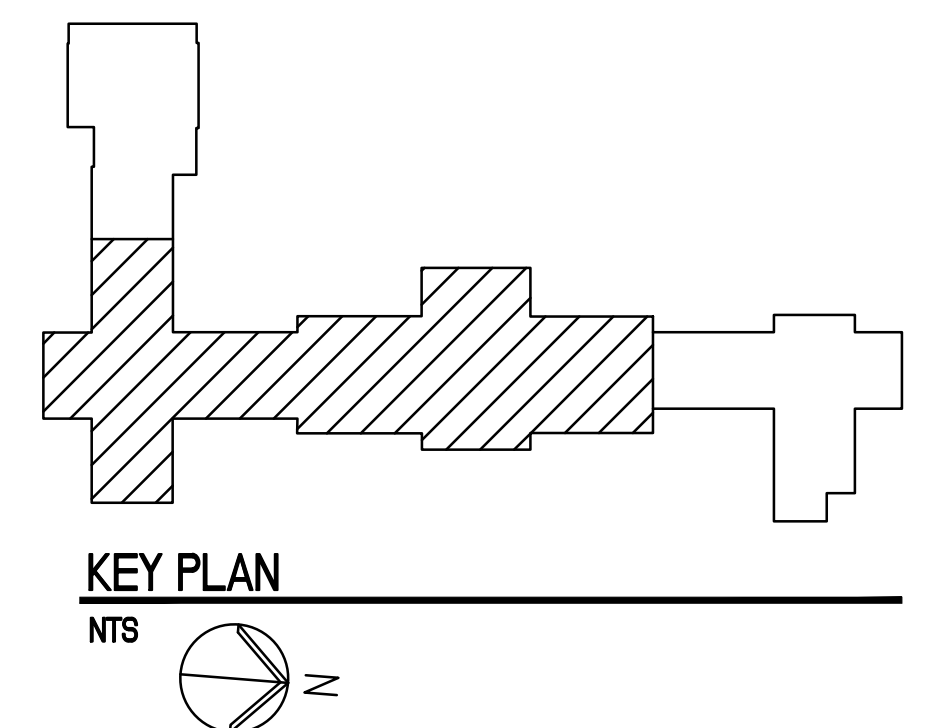
DRAWING NO.
VAMC-528A6-0012

FD105
Dwg. 7 of 32

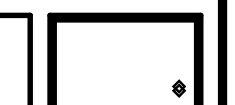

(RX) REMOVE EXISTING DEVICE OR EQUIPMENT
(XR) EXISTING DEVICE OR EQUIPMENT TO BE REMOVED AND REPLACED AT
SAME LOCATION



1 PARTIAL FLOOR PLAN
1/8" = 1'-0"



FULLY SPRINKLERED
CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION

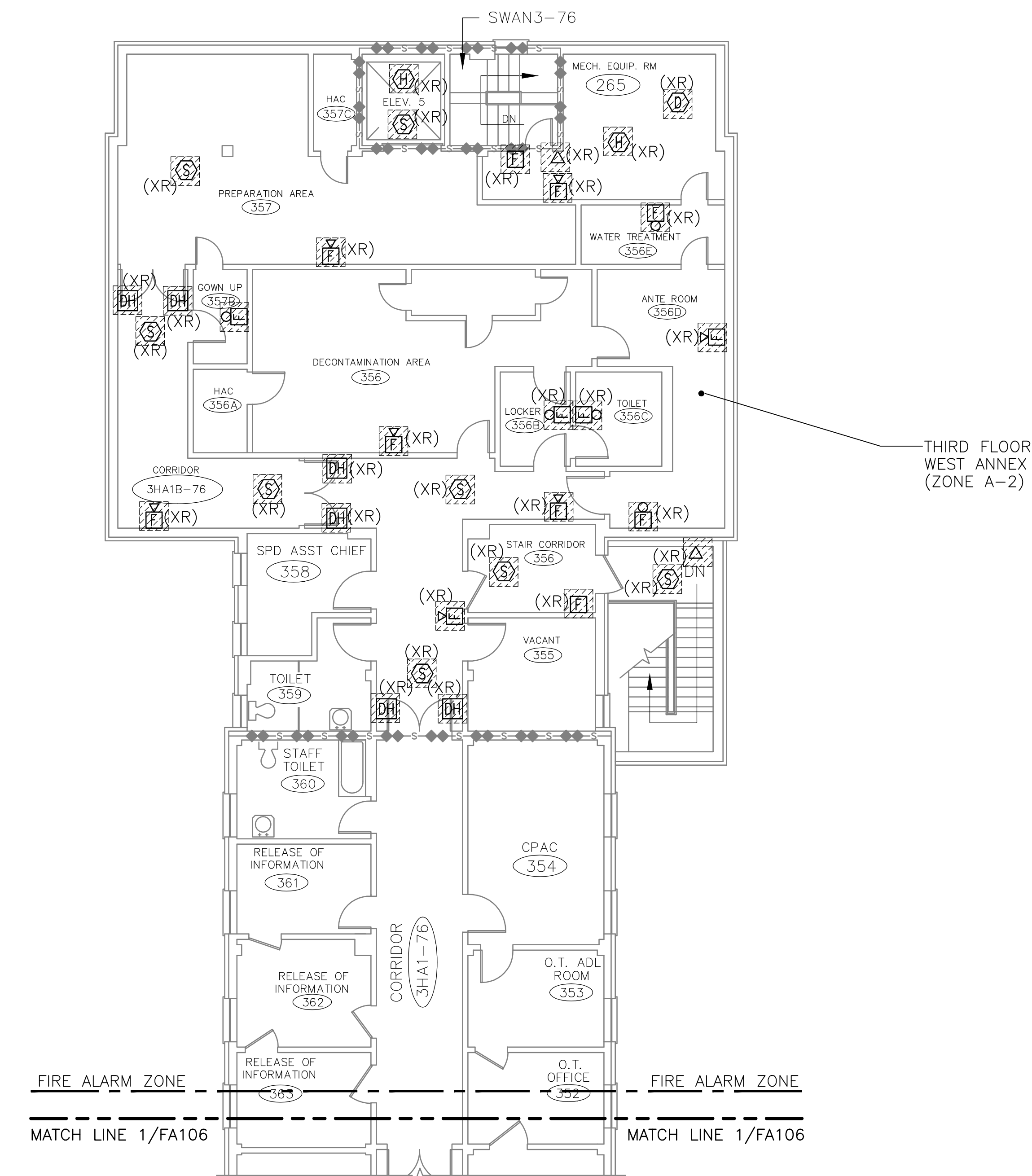
	ARCHITECT/ENGINEERS:		ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. _____ Date _____	Approved: Fire Chief _____ Date _____	Approved: Patient Safety _____ Date _____	Drawing Title FIRE ALARM DEMOLITION / REPLACEMENT THIRD FLOOR SOUTH	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	
	 PARADIGM ENGINEERS AND CONSTRUCTORS <small>200 Envoy Circle #201, Louisville KY 40299 – PH: 502.339.8511 – www.paradigmusa.com</small>		Approved: Logistics Manager _____ Date _____	Approved: Interior Designer _____ Date _____	Approved: Safety Officer _____ Date _____	Approved: M&R Foreman _____ Date _____	Project No. 528A6-14-601	DRAWING NO. VAMC-528A6-0012		
			Approved: Infection Control Mgr. _____ Date _____	Approved: Info. Sys. _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Building No. 76	Checked WLM	Drawn MMF	
			Approved: Chief Security _____ Date _____	Approved: Women's Health Rep _____ Date _____	Approved: Space Owner _____ Date _____	Approved: Associate Director _____ Date _____	Approved: Medical Center Director _____ Date _____	Location BATH, NEW YORK	FD106 Dwg. 8 of 32	
Revisions _____	Date _____									

GENERAL FIRE ALARM DEMOLITION PLAN NOTES

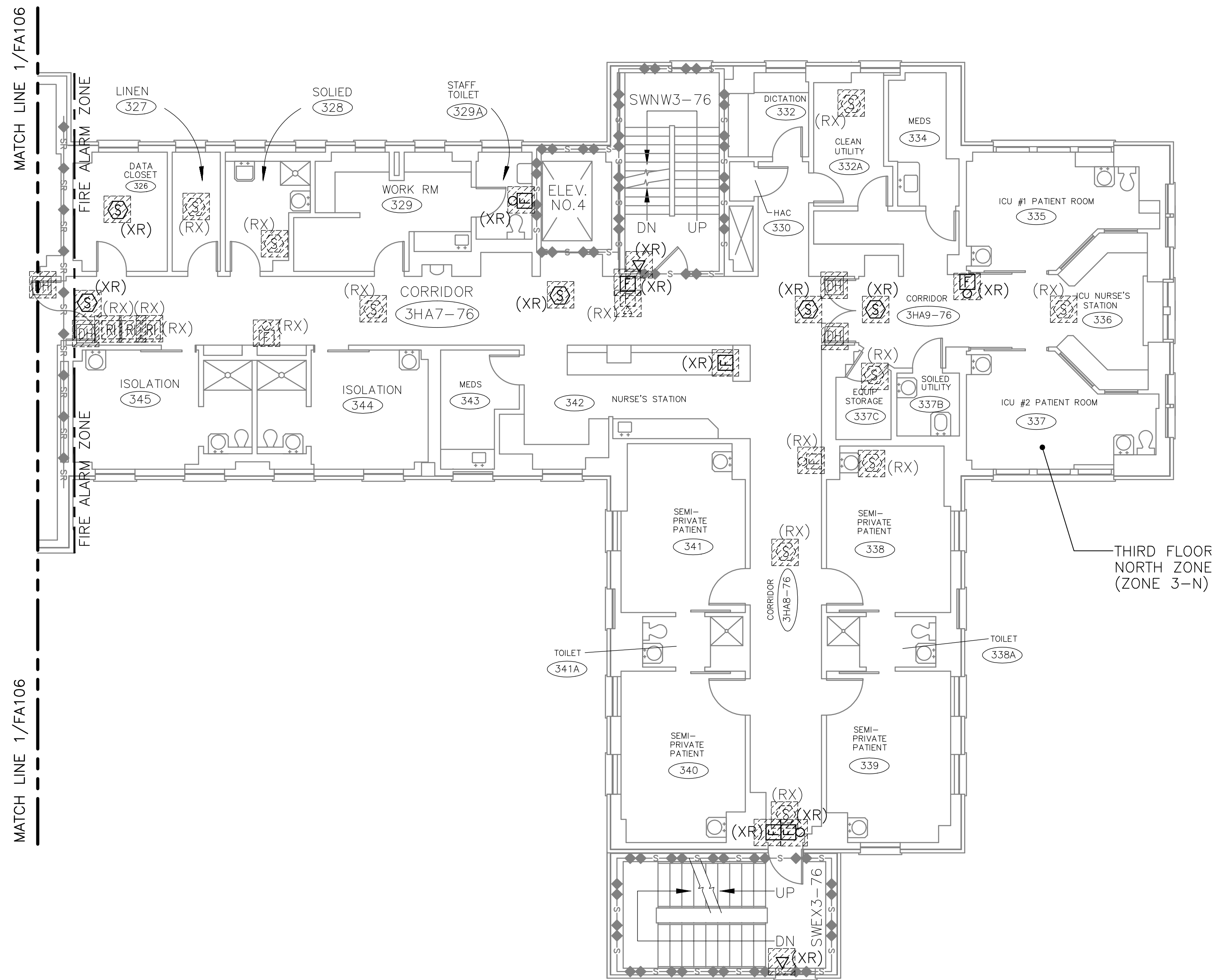
A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.

B. RENOVATION NOTATIONS:

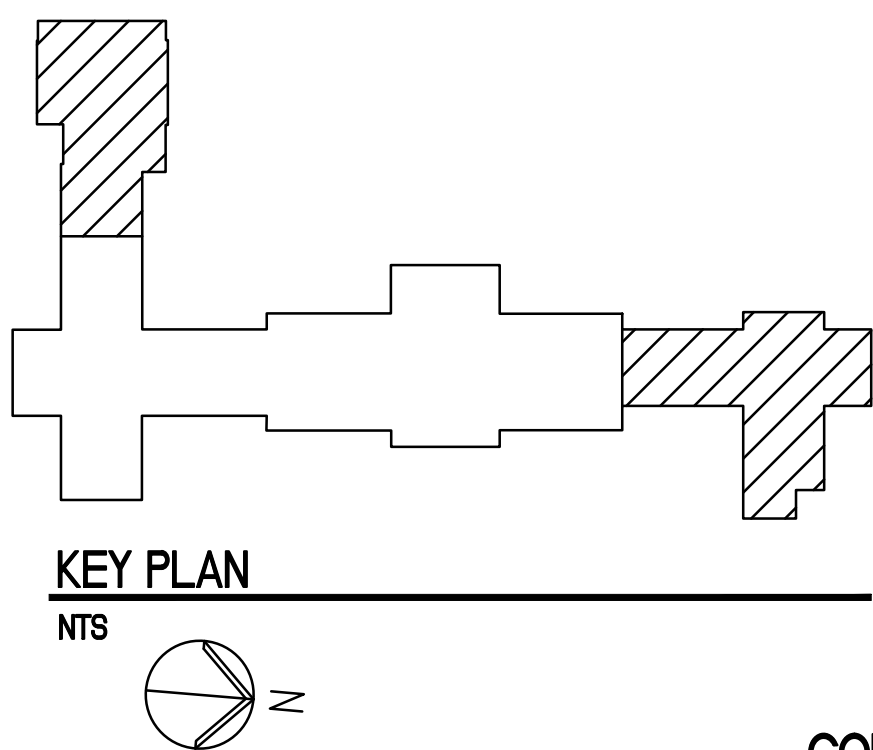
- (RX) REMOVE EXISTING DEVICE OR EQUIPMENT
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1 PARTIAL FLOOR PLAN
1/8" = 1'-0"



2 PARTIAL FLOOR PLAN
1/8" = 1'-0"



FULLY SPRINKLERED
CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION

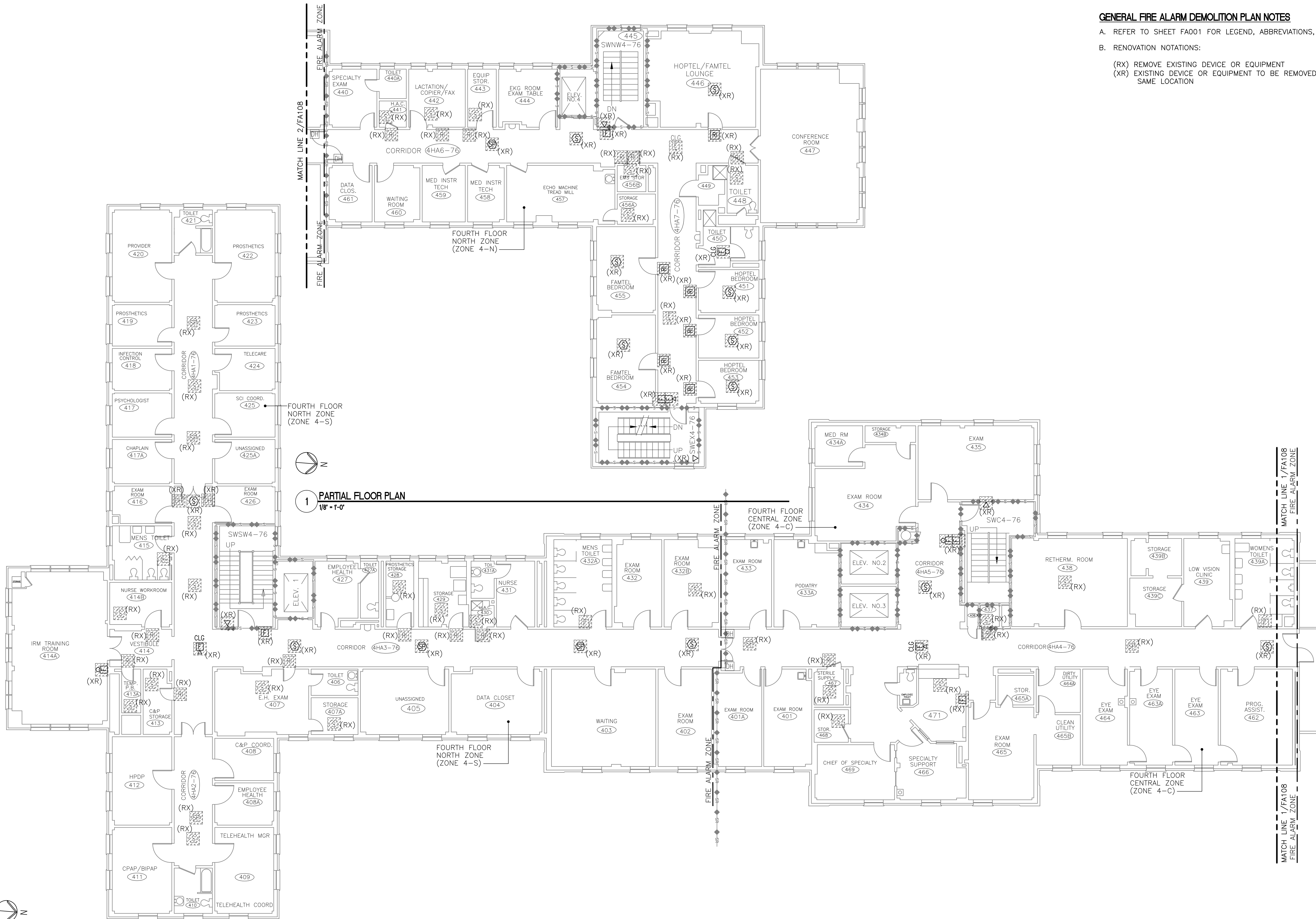
		ARCHITECT/ENGINEERS:	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E.	Date	Approved: Fire Chief	Date	Approved: Patient Safety	Date	Drawing Title FIRE ALARM DEMOLITION / REPLACEMENT THIRD FLOOR	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	A V				
		<div>PARADIGM ENGINEERS AND CONSTRUCTORS</div>	Approved: Logistics Manager.	Date	Approved: Interior Designer	Date	Approved: Safety Officer	Date	Approved: M&R Foreman	Date		Project No. 528A6-14-601					
Revisions	Date	200 Envoy Circle #201, Louisville KY 40299 ~ PH: 502.339.8511 ~ www.paradigmusa.com	Approved: Infection Control Mgr.	Date	Approved: Info. Sys.	Date	Approved: Industrial Hygienist	Date	Approved: Industrial Hygienist	Date	Approved: Eng. Project Supervisor	Date	Building No. 76	Checked WLM	Drawn MMF	DRAWING NO. VAMC-528A6-0012	FD107 Dwg. 9 of 32
			Approved: Chief Security	Date	Approved: Women's Health Rep	Date	Approved: Space Owner	Date	Approved: Associate Director	Date	Approved: Medical Center Director	Date	Location BATH, NEW YORK				

GENERAL FIRE ALARM DEMOLITION PLAN NOTES

A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.

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(XR) EXISTING DEVICE OR EQUIPMENT TO BE REMOVED AND REPLACED AT SAME LOCATION



1 PARTIAL FLOOR PLAN
1/8" = 1'-0"

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1/8" = 1'-0"

ARCHITECT/ENGINEERS:

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CODES & O.S.H.A.

Approved: Logistics Manager. Date
Approved: Infection Control Mgr. Date
Approved: Chief Security Date

Approved: A.F.G.E. Date
Approved: Interior Designer Date
Approved: Info. Sys. Date
Approved: Women's Health Rep Date

Approved: Fire Chief Date
Approved: Safety Officer Date
Approved: Industrial Hygienist Date
Approved: Space Owner Date

Approved: Patient Safety Date
Approved: M&R Foreman Date
Approved: Industrial Hygienist Date
Approved: Associate Director Date

Drawing Title
**FIRE ALARM
DEMOLITION / REPLACEMENT
FOURTH FLOOR**

Approved: Eng. Project Supervisor Date
Approved: Medical Center Director Date

Project Title
**UPGRADE FIRE ALARM
SYSTEM BUILDING 76**

Building No. 76
Location
BATH, NEW YORK

Checked
WLM

Drawn
MMF

Date
06-27-2014

Project No.
528A6-14-601

DRAWING NO.
VAMC-528A6-0012

FD108
Dwg. 10 of 32

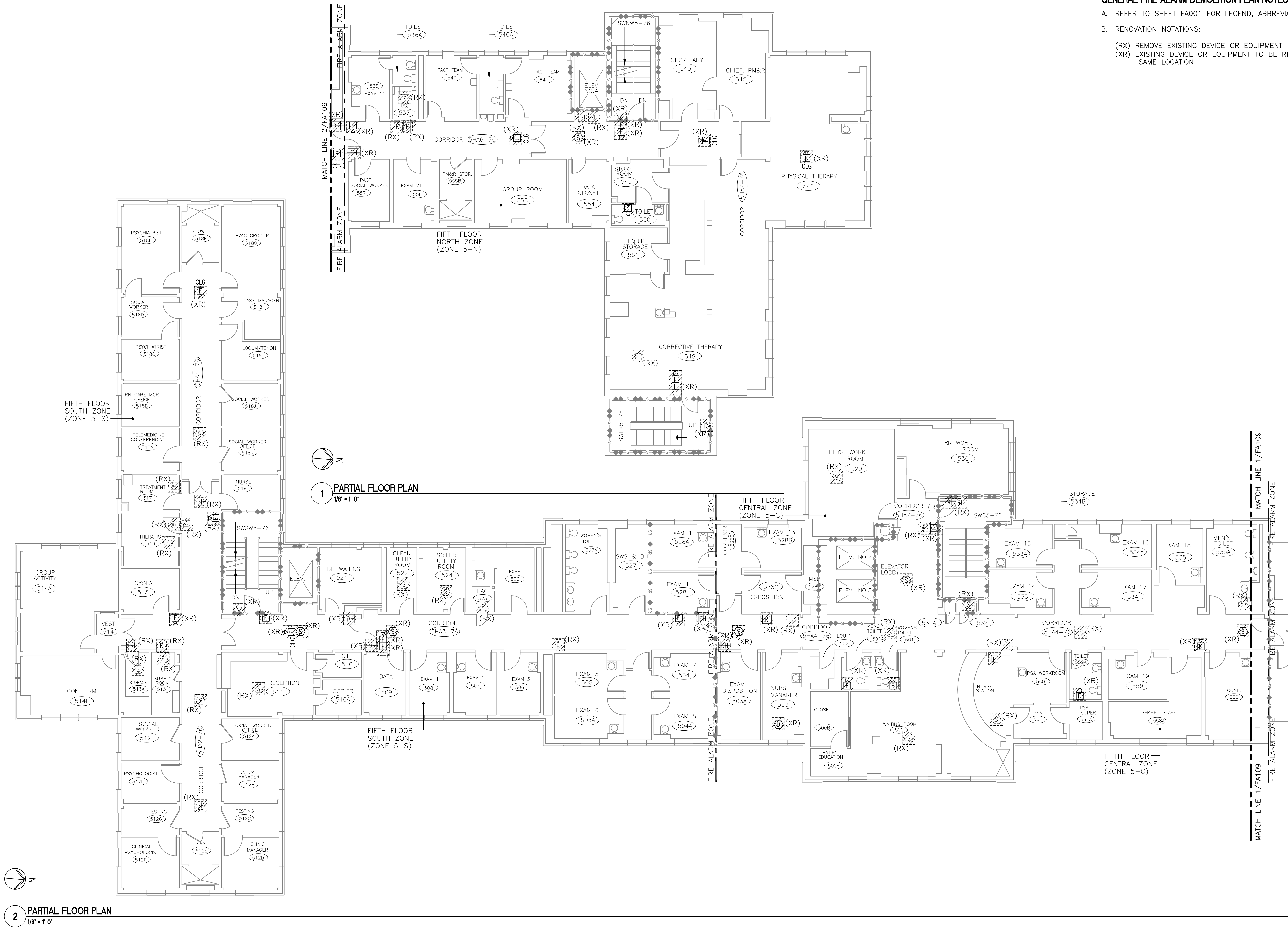
FULLY SPRINKLERED
CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION

GENERAL FIRE ALARM DEMOLITION PLAN NOTES

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CODES & O.S.H.A.

Approved: Logistics Manager. Date

Approved: Infection Control Mgr. Date

Approved: Chief Security Date

Approved: A.F.G.E. Date

Approved: Interior Designer Date

Approved: Info. Sys. Date

Approved: Women's Health Rep Date

Approved: Fire Chief Date

Approved: Safety Officer Date

Approved: Industrial Hygienist Date

Approved: Space Owner Date

Approved: Patient Safety Date

Approved: M&R Foreman Date

Approved: Industrial Hygienist Date

Approved: Associate Director Date

Drawing Title
**FIRE ALARM
DEMOLITION / REPLACEMENT
FIFTH FLOOR**

Approved: Eng. Project Supervisor Date

Approved: Medical Center Director Date

Project Title
**UPGRADE FIRE ALARM
SYSTEM BUILDING 76**

Building No.
76

Location
BATH, NEW YORK

Checked
WLM

Drawn
MMF

Date
06-27-2014

Project No.
528A6-14-601

DRAWING NO.
VAMC-528A6-0012

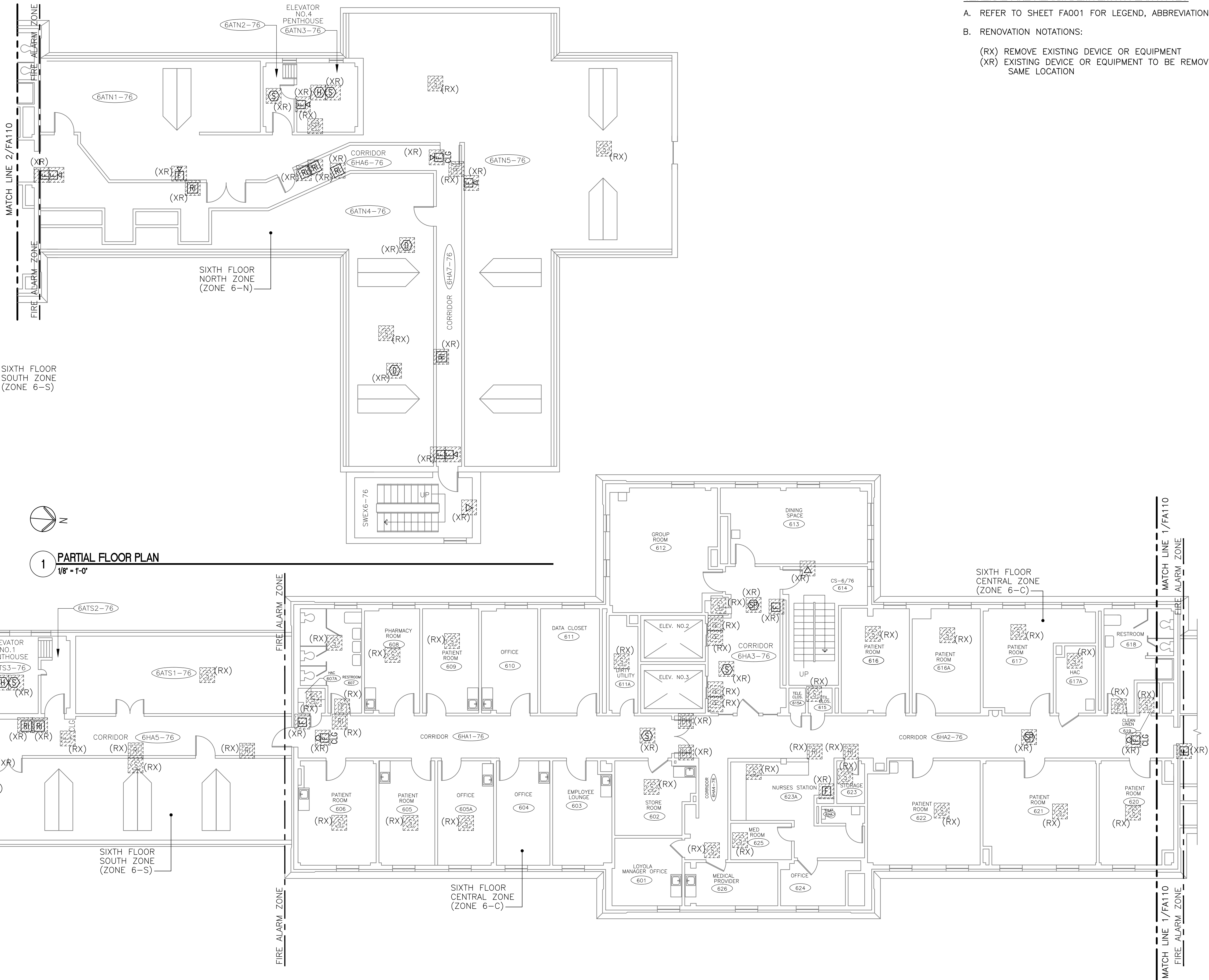
FD109
Dwg. 11 of 32

Revisions

Date

GENERAL FIRE ALARM DEMOLITION PLAN NOTES

- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
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1/8" = 1'-0"

ARCHITECT/ENGINEERS:

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N.F.P.A., NATIONAL, STATE AND CITY
CODES & O.S.H.A.

Approved: Logistics Manager. Date
Approved: Infection Control Mgr. Date
Approved: Chief Security Date

Approved: A.F.G.E. Date
Approved: Interior Designer Date
Approved: Info. Sys. Date
Approved: Women's Health Rep Date

Approved: Fire Chief Date
Approved: Safety Officer Date
Approved: Industrial Hygienist Date
Approved: Space Owner Date

Approved: Patient Safety Date
Approved: M&R Foreman Date
Approved: Industrial Hygienist Date
Approved: Associate Director Date

Drawing Title
**FIRE ALARM
DEMOLITION / REPLACEMENT
SIXTH FLOOR**

Approved: Eng. Project Supervisor Date
Approved: Medical Center Director Date

Project Title
**UPGRADE FIRE ALARM
SYSTEM BUILDING 76**

Building No. 76
Location
BATH, NEW YORK

Checked WLM
Drawn MMF

Drawing No.
VAMC-528A6-0012
FD110
Dwg. 12 of 32

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CONSTRUCTION DOCUMENTS
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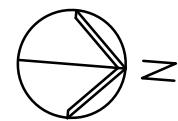
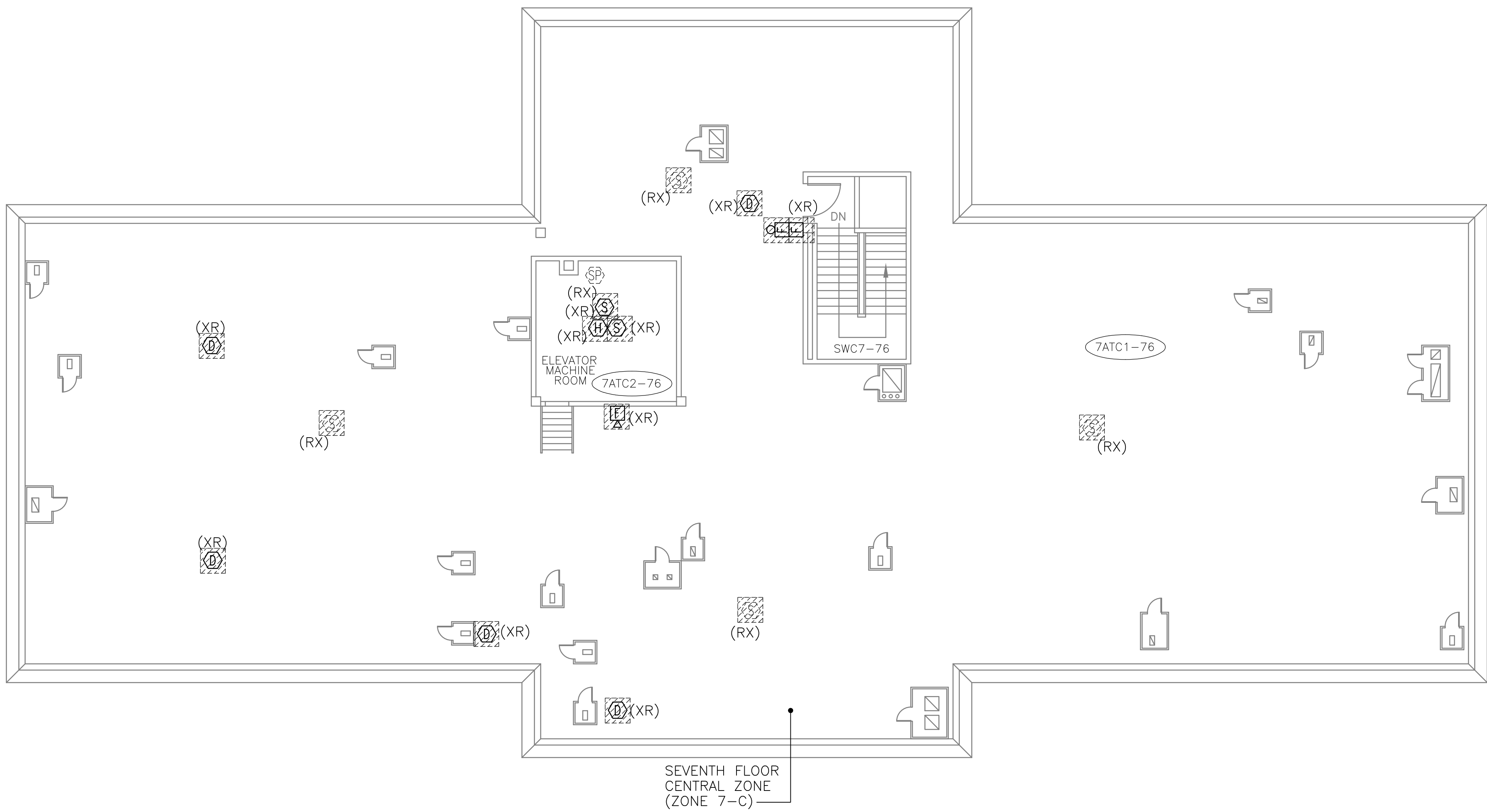
Revisions
Date

GENERAL FIRE ALARM DEMOLITION PLAN NOTES

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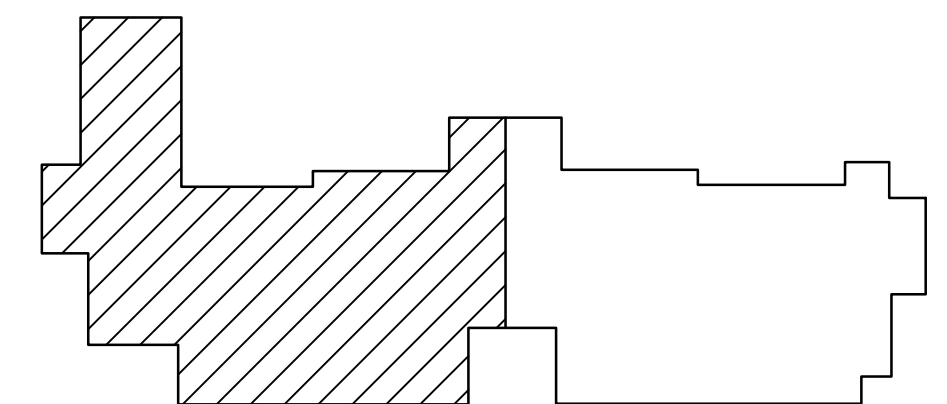
1 FLOOR PLAN
1/8" = 1'-0"

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CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION

		ARCHITECT/ENGINEERS:	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E.	Date	Approved: Fire Chief	Date	Approved: Patient Safety	Date	Drawing Title FIRE ALARM DEMOLITION / REPLACEMENT SEVENTH FLOOR	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	<div>↗</div>					
		<div>PARADIGM</div> <div>ENGINEERS AND CONSTRUCTORS</div>	Approved: Logistics Manager.	Date	Approved: Interior Designer	Date	Approved: Safety Officer	Date	Approved: M&R Foreman	Date		Project No. 528A6-14-601						
			Approved: Infection Control Mgr.	Date	Approved: Info. Sys.	Date	Approved: Industrial Hygienist	Date	Approved: Industrial Hygienist	Date		Approved: Eng. Project Supervisor		Date	Building No. 76	Checked WLM	Drawn MMF	DRAWING NO. VAMC-528A6-0012
			Approved: Chief Security	Date	Approved: Women's Health Rep	Date	Approved: Space Owner	Date	Approved: Associate Director	Date		Approved: Medical Center Director		Date	Location BATH, NEW YORK	Dwg. 13 of 32		
Revisions	Date	200 Envoy Circle #201, Louisville KY 40299 ~ PH: 502.339.8511 ~ www.paradigmusa.com																

- E. ALL FIRE ALARM CIRCUITING SHALL BE IN EMT CONDUIT, 3/4" MINIMUM.

1. ALL SPRINKLER LOW PRESSURE, TAMPER, AND FLOW SWITCHES ARE EXISTING TO REMAIN. REMOVE EXISTING FIRE ALARM INTERFACE MODULES AND FURNISH AND INSTALL NEW MODULES FOR MONITORING BY NEW SYSTEM.



A diagram of a sphere with a vertical line and a horizontal line, labeled N.

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CONSTRUCTION DOCUMENTS
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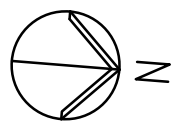
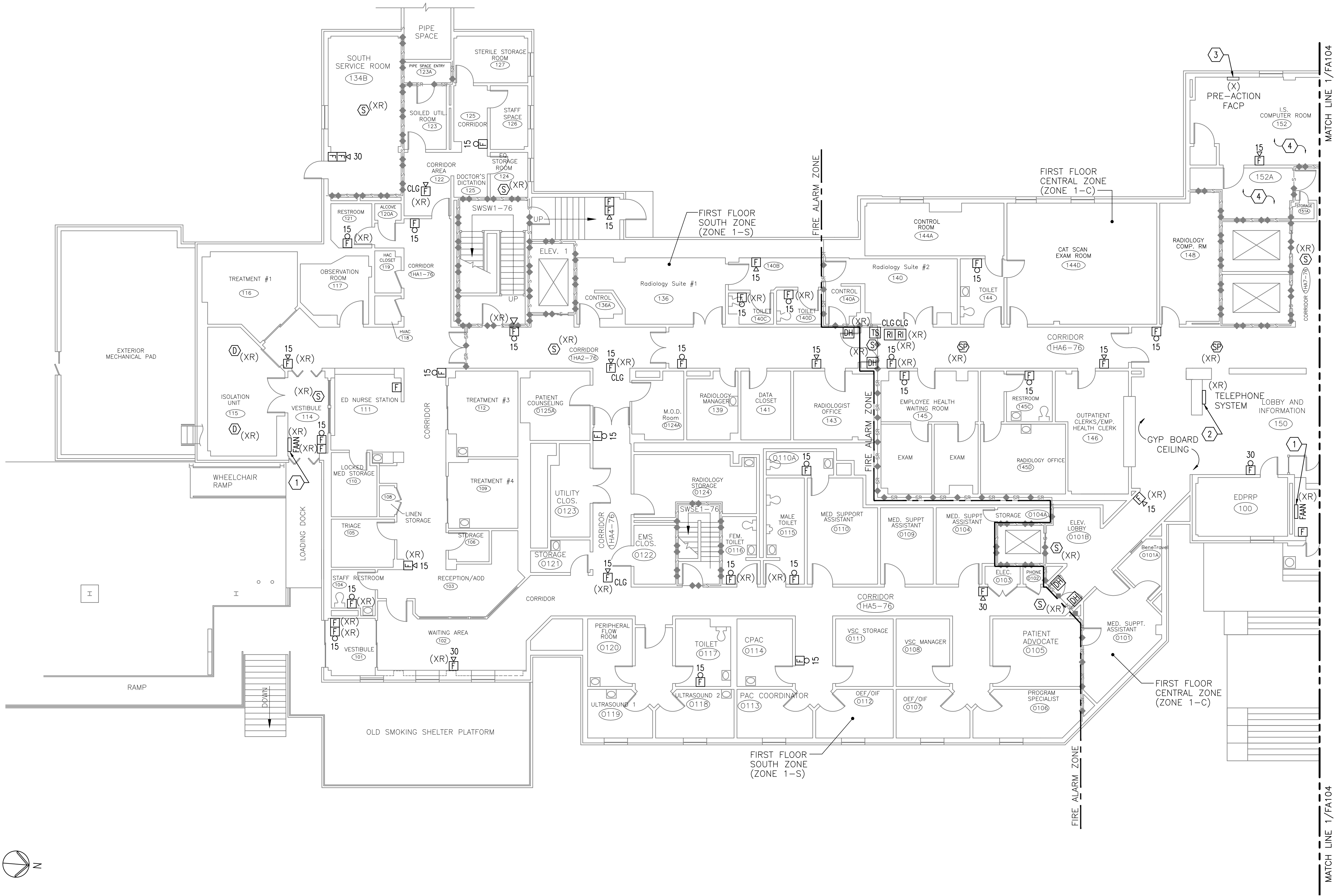
<div>Revisions</div> <div>Date</div>	<div>ARCHITECT/ENGINEERS:</div> <div><div>PARADIGM</div><div>ENGINEERS AND CONSTRUCTORS</div></div> <div>200 Envoy Circle #201, Louisville KY 40299 – PH: 502.339.8511 – www.paradigmusa.com</div>	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. _____ Date _____	Approved: Fire Chief _____ Date _____	Approved: Patient Safety _____ Date _____	Drawing Title FIRE ALARM - GROUND FLOOR PLAN SOUTH	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	<div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> <div>▲</div> 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GENERAL FIRE ALARM PLAN NOTES

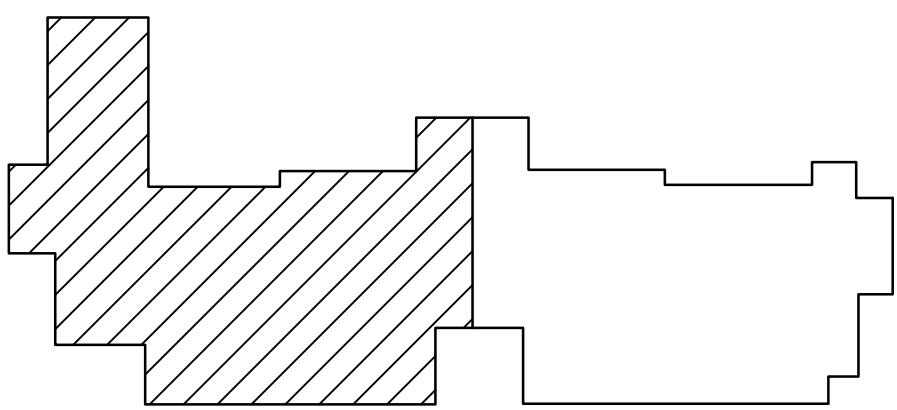
- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
- B. RENOVATION NOTATIONS:
- (R) LOCATION OF RELOCATED DEVICE OR EQUIPMENT
(RR) REMOVE AND RELOCATE EXISTING DEVICE OR EQUIPMENT
(X) EXISTING DEVICE OR EQUIPMENT TO REMAIN
(XR) EXISTING FIRE ALARM DEVICE OR EQUIPMENT THAT HAS BEEN REMOVED AND REPLACED WITH NEW, RE-USE EXISTING CONDUIT WHENEVER POSSIBLE.
- C. ALL AREAS SHALL BE CONSIDERED TO BE LAY-IN CEILING UNLESS NOTED OTHERWISE.
- D. THE CONTRACTOR SHALL BE RESPONSIBLE FOR CUTTING AND PATCHING WALLS AS REQUIRED.
- E. ALL FIRE ALARM CIRCUITING SHALL BE IN EMT CONDUIT, 3/4" MINIMUM.

FIRE ALARM PLAN NOTES

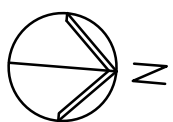
1. REPLACE EXISTING ANNUNCIATOR WITH FIREMAN'S REMOTE CONTROL FUNCTIONS WITH NEW PANEL THAT IS FULLY COMPATIBLE WITH NEW FIRE ALARM SYSTEM.
2. REPLACE EXISTING TELEPHONE COMMAND CENTER WITH NEW PANEL THAT IS FULLY COMPATIBLE WITH NEW FIRE ALARM SYSTEM.
3. EXISTING PRE-ACTION PANEL TO REMAIN, PROVIDE MONITOR MODULE WITHIN THE EXISTING PANEL AND CONNECT TO NEW FACP.
4. EXISTING SMOKE DETECTORS INSTALLED IN THE RAISED FLOOR ARE EXISTING TO REMAIN.



1 PARTIAL FLOOR PLAN
1/8" = 1'-0"



KEY PLAN
NTS

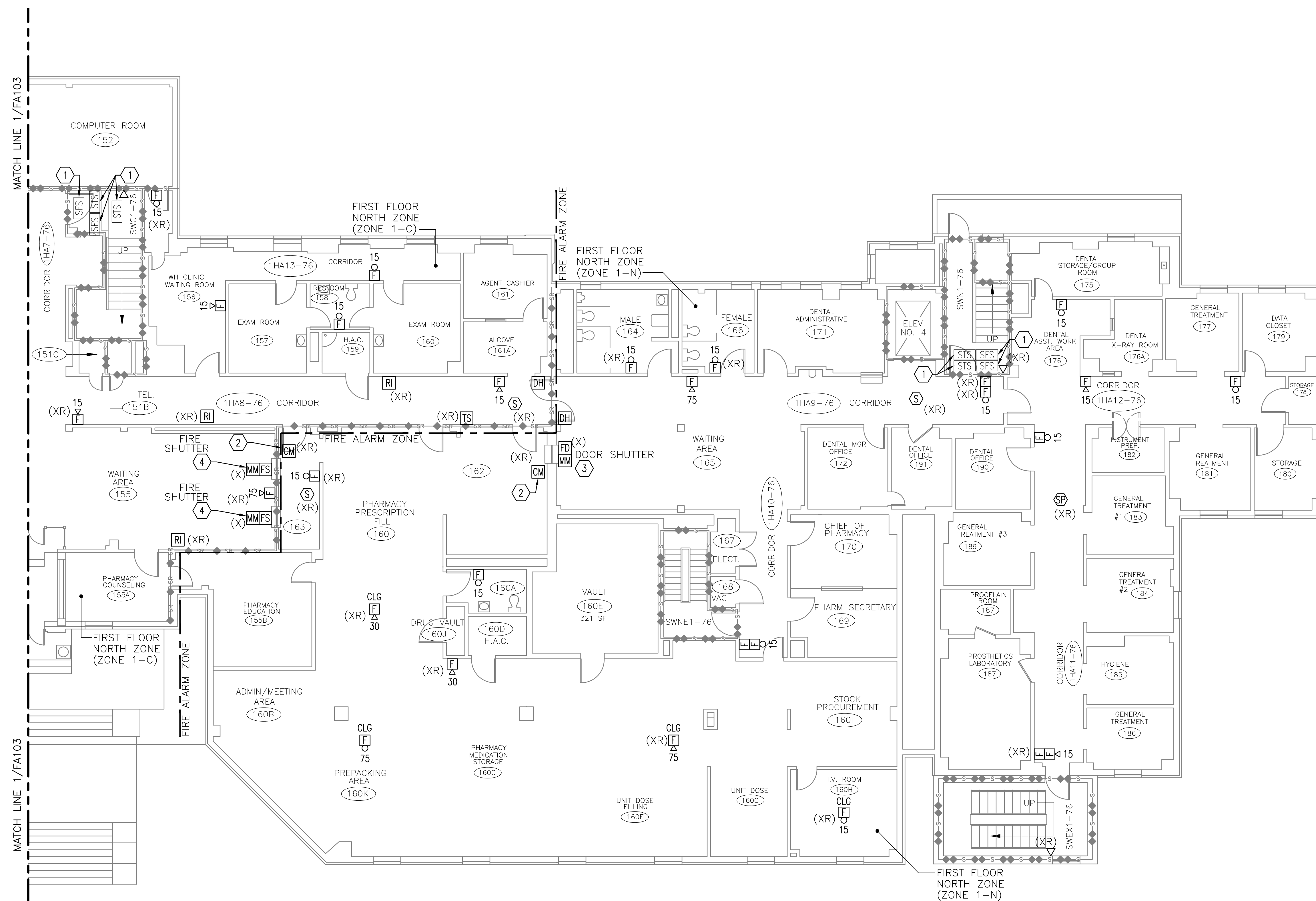


FULLY SPRINKLERED
CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION

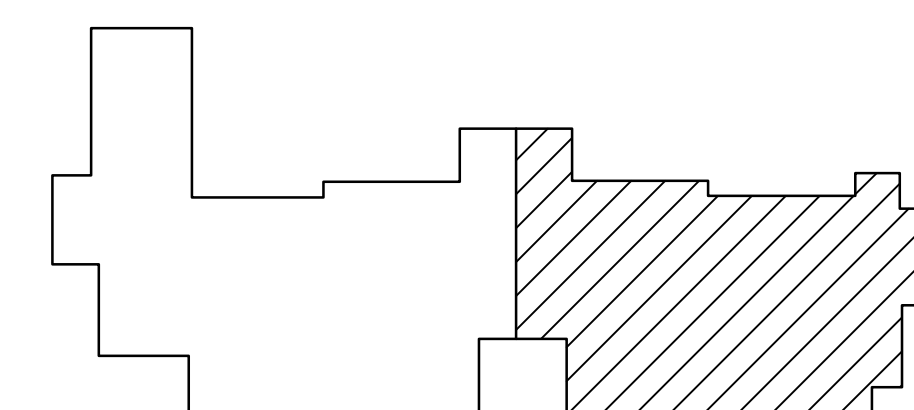
		ARCHITECT/ENGINEERS:	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E.	Date	Approved: Fire Chief	Date	Approved: Patient Safety	Date	Drawing Title FIRE ALARM - FIRST FLOOR PLAN SOUTH	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	A				
		<div>PARADIGM ENGINEERS AND CONSTRUCTORS</div>	Approved: Logistics Manager.	Date	Approved: Interior Designer	Date	Approved: Safety Officer	Date	Approved: M&R Foreman	Date		Project No. 528A6-14-601					
Revisions	Date	200 Envoy Circle #201, Louisville KY 40299 ~ PH: 502.339.8511 ~ www.paradigmusa.com	Approved: Infection Control Mgr.	Date	Approved: Info. Sys.	Date	Approved: Industrial Hygienist	Date	Approved: Industrial Hygienist	Date	Approved: Eng. Project Supervisor	Date	Building No. 76	Checked WLM	Drawn MMF	DRAWING NO. VAMC-528A6-0012 FA103	A
			Approved: Chief Security	Date	Approved: Women's Health Rep	Date	Approved: Space Owner	Date	Approved: Associate Director	Date	Approved: Medical Center Director	Date	Location BATH, NEW YORK			Dwg. 16 of 32	

- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
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 - (R) LOCATION OF RELOCATED DEVICE OR EQUIPMENT
 - (RR) REMOVE AND RELOCATE EXISTING DEVICE OR EQUIPMENT
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- D. THE CONTRACTOR SHALL BE RESPONSIBLE FOR CUTTING AND PATCHING WALLS AS REQUIRED.
- E. ALL FIRE ALARM CIRCUITING SHALL BE IN EMT CONDUIT, 3/4" MINIMUM.

1. ALL SPRINKLER LOW PRESSURE, TAMPER, AND FLOW SWITCHES ARE EXISTING TO REMAIN. REMOVE EXISTING FIRE ALARM INTERFACE MODULES AND FURNISH AND INSTALL NEW MODULES FOR MONITORING BY NEW SYSTEM.
2. FURNISH AND INSTALL NEW CONTROL MODULES FOR EXISTING SECURITY WINDOW RELEASE.
3. EXISTING DOOR SHUTTER TO REMAIN, ADD MONITOR MODULE TO EXISTING DOOR SHUTTER, CONNECT F/A CIRCUITING TO NEW FACP.
4. EXISTING FIRE SHUTTER TO REMAIN, ADD MONITOR MODULE TO EXISTING FIRE SHUTTER, CONNECT F/A CIRCUITING TO NEW FACP.



1 PARTIAL FLOOR PLAN
1/8" = 1'-0"

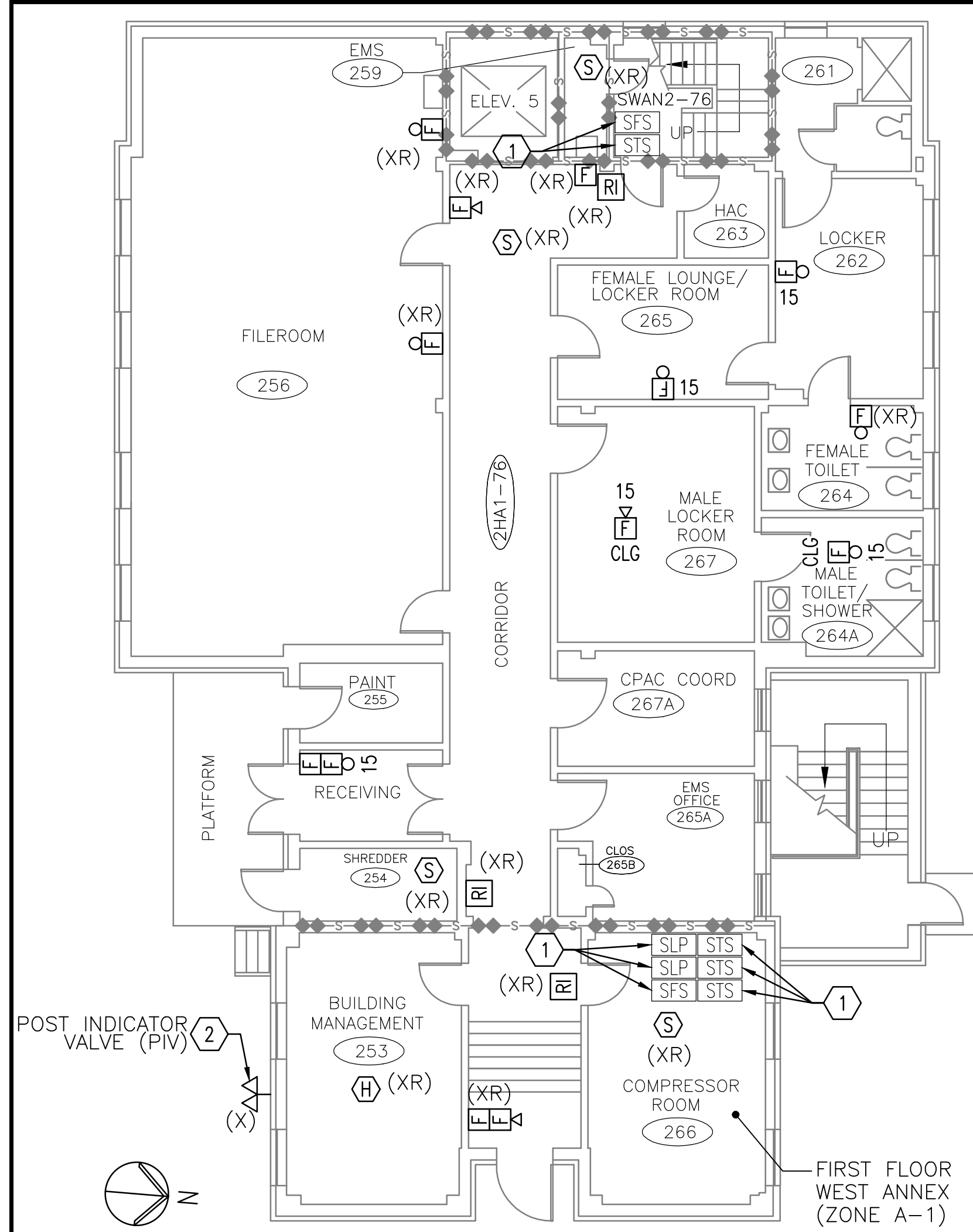


KEY PLAN
NTS

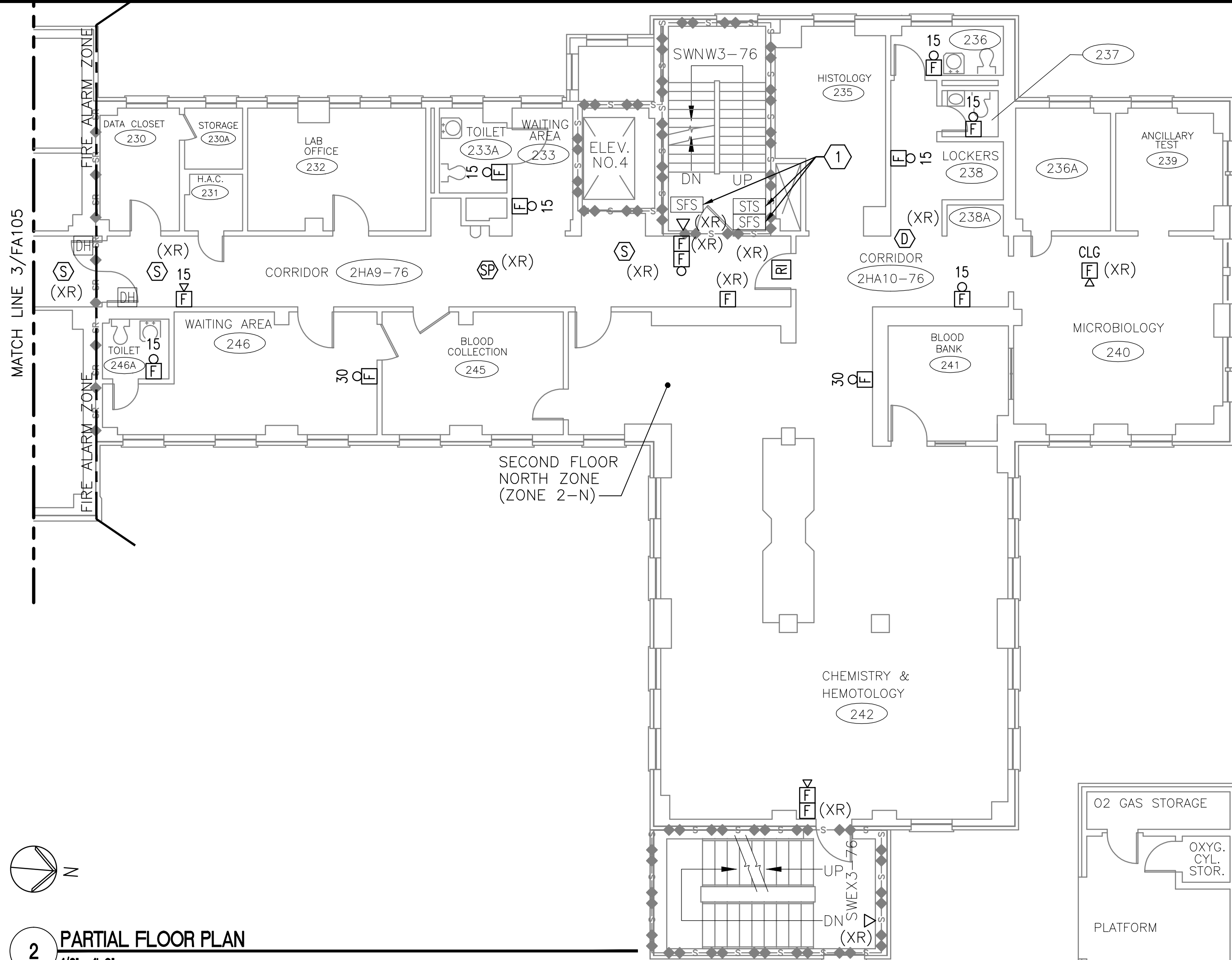


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CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION

<div>Revisions</div> <div>Date</div>	<div>ARCHITECT/ENGINEERS:</div> <div><div>PARADIGM</div><div>ENGINEERS AND CONSTRUCTORS</div></div> <div>200 Envoy Circle #201, Louisville KY 40299 ~ PH: 502.339.8511 ~ www.paradigmusa.com</div>	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. Date	Approved: Fire Chief Date	Approved: Patient Safety Date	Drawing Title FIRE ALARM - FIRST FLOOR PLAN NORTH	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	<div>North Arrow</div>		
		Approved: Logistics Manager. Date	Approved: Interior Designer Date	Approved: Safety Officer Date	Approved: M&R Foreman Date		Project No. 528A6-14-601				
		Approved: Infection Control Mgr. Date	Approved: Info. Sys. Date	Approved: Industrial Hygienist Date	Approved: Industrial Hygienist Date	Approved: Eng. Project Supervisor Date	Building No. 76	Checked WLM		Drawn MMF	DRAWING NO. VAMC-528A6-0012
		Approved: Chief Security Date	Approved: Women's Health Rep Date	Approved: Space Owner Date	Approved: Associate Director Date	Approved: Medical Center Director Date	Location BATH, NEW YORK	FA104		Dwg. 17 of 32	



1 WEST ANNEX - FLOOR PLAN
1/8" = 1'-0"



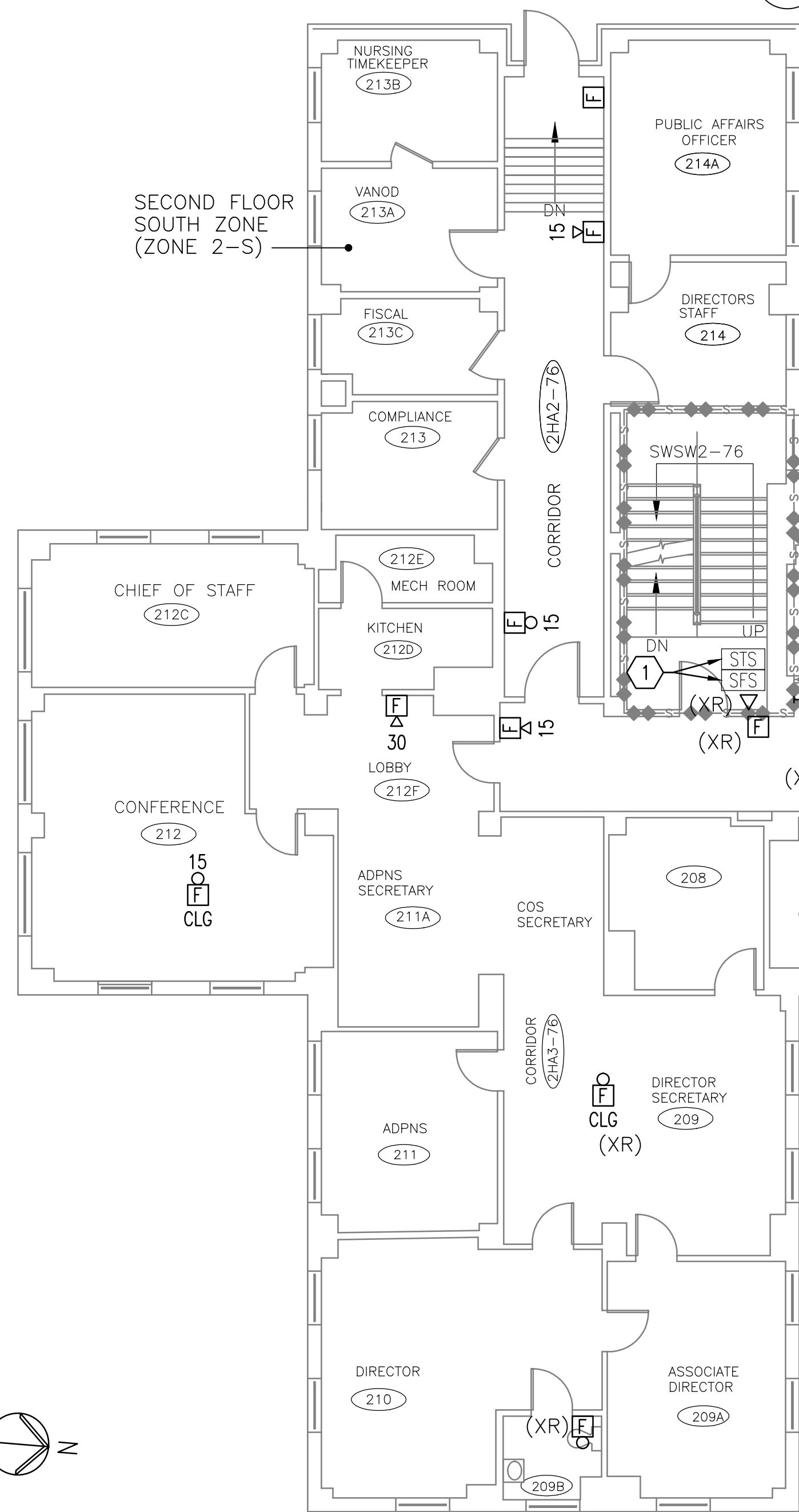
2 PARTIAL FLOOR PLAN
1/8" = 1'-0"

GENERAL FIRE ALARM PLAN NOTES

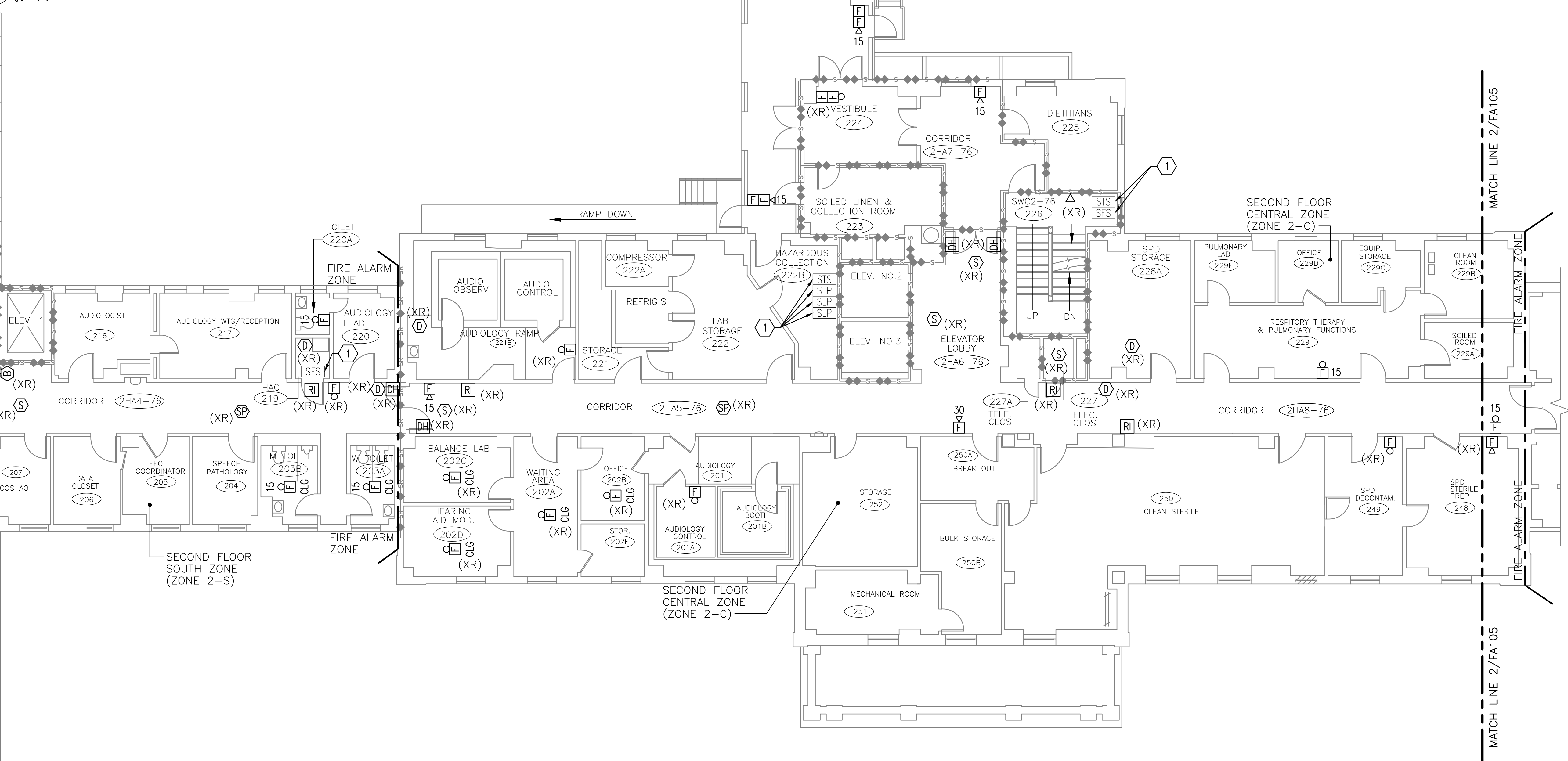
- REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
- RENOVATION NOTATIONS:
 - (R) LOCATION OF RELOCATED DEVICE OR EQUIPMENT
 - (RR) REMOVE AND RELOCATE EXISTING DEVICE OR EQUIPMENT
 - (X) EXISTING DEVICE OR EQUIPMENT TO REMAIN
 - (XR) EXISTING FIRE ALARM DEVICE OR EQUIPMENT THAT HAS BEEN REMOVED AND REPLACED WITH NEW, RE-USE EXISTING CONDUIT WHENEVER POSSIBLE.
- ALL AREAS SHALL BE CONSIDERED TO BE LAY-IN CEILING UNLESS NOTED OTHERWISE.
- THE CONTRACTOR SHALL BE RESPONSIBLE FOR CUTTING AND PATCHING WALLS AS REQUIRED.
- ALL FIRE ALARM CIRCUITING SHALL BE IN EMT CONDUIT, 3/4" MINIMUM.

FIRE ALARM PLAN NOTES

- ALL SPRINKLER LOW PRESSURE, TAMPER, AND FLOW SWITCHES ARE EXISTING TO REMAIN. REMOVE EXISTING FIRE ALARM INTERFACE MODULES AND FURNISH AND INSTALL NEW MODULES FOR MONITORING BY NEW SYSTEM.
- ADD MONITOR MODULE AT EXISTING POST INDICATOR VALVE (PIV) AND CONNECT TO NEW FACP.



3 PARTIAL FLOOR PLAN
1/8" = 1'-0"



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ARCHITECT/ENGINEERS:

PARADIGM
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N.F.P.A., NATIONAL, STATE AND CITY
CODES & O.S.H.A.

Approved: Logistics Manager. Date
Approved: Infection Control Mgr. Date
Approved: Chief Security Date

Approved: A.F.G.E. Date

Approved: Interior Designer Date
Approved: Info. Sys. Date
Approved: Women's Health Rep Date

Approved: Fire Chief Date

Approved: Safety Officer Date
Approved: Industrial Hygienist Date
Approved: Space Owner Date

Approved: Patient Safety Date

Approved: M&R Foreman Date
Approved: Industrial Hygienist Date
Approved: Associate Director Date

Drawing Title
FIRE ALARM - SECOND FLOOR PLAN

Approved: Eng. Project Supervisor Date
Approved: Medical Center Director Date

Project Title
UPGRADE FIRE ALARM
SYSTEM BUILDING 76

Building No.
76
Location
BATH, NEW YORK

Checked
WLM

Drawn
MMF

Date
06-27-2014

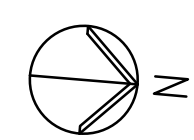
Project No.
528A6-14-601

DRAWING NO.
VAMC-528A6-0012
FA105
Dwg. 18 of 32

Revisions Date

- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
- B. RENOVATION NOTATIONS:
 - (R) LOCATION OF RELOCATED DEVICE OR EQUIPMENT
 - (RR) REMOVE AND RELOCATE EXISTING DEVICE OR EQUIPMENT
 - (X) EXISTING DEVICE OR EQUIPMENT TO REMAIN
 - (XR) EXISTING FIRE ALARM DEVICE OR EQUIPMENT THAT HAS BEEN REMOVED AND REPLACED WITH NEW, RE-USE EXISTING CONDUIT WHENEVER POSSIBLE.
- C. ALL AREAS SHALL BE CONSIDERED TO BE LAY-IN CEILING UNLESS NOTED OTHERWISE.
- D. THE CONTRACTOR SHALL BE RESPONSIBLE FOR CUTTING AND PATCHING WALLS AS REQUIRED.
- E. ALL FIRE ALARM CIRCUITING SHALL BE IN EMT CONDUIT, 3/4" MINIMUM.

1. ALL SPRINKLER FLOW PRESSURE, TAMPER, AND FLOW SWITCHES ARE EXISTING TO REMAIN. REMOVE EXISTING FIRE ALARM INTERFACE MODULES AND FURNISH AND INSTALL NEW MODULES FOR MONITORING BY NEW SYSTEM.
2. FURNISH AND INSTALL MODULES TO MONITOR EXISTING LOCAL FIRE SUPPRESSION SYSTEM.
3. FURNISH AND INSTALL CONTROL MODULE TO CONTROL DIMMING SYSTEM TO BRING LIGHTING TO FULL BRIGHTNESS.

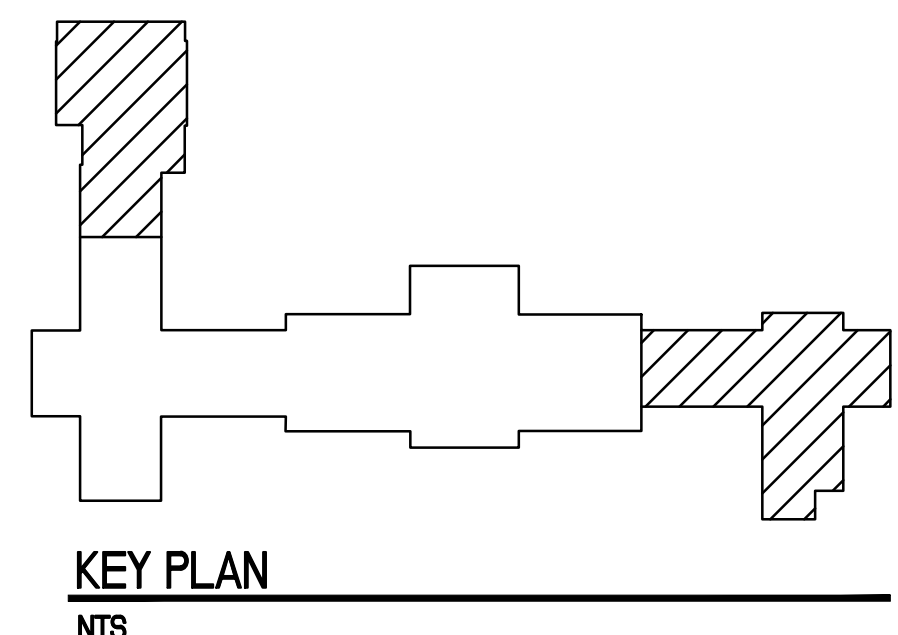


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		<div>ARCHITECT/ENGINEERS:</div> <div><div>PARADIGM</div><div>ENGINEERS AND CONSTRUCTORS</div></div> <div>200 Envoy Circle #201, Louisville KY 40299 ~ PH: 502.339.8511 ~ www.paradigmuso.com</div>	ALL WORK TO BE IN ACCORDANCE WITH N.E.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. _____ Date _____	Approved: Fire Chief _____ Date _____	Approved: Patient Safety _____ Date _____	Drawing Title FIRE ALARM - THIRD FLOOR SOUTH	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	<div>Project No. 528A6-14-601</div> <div>DRAWING NO. VAMC-528A6-0012</div> <div>FA106</div> <div>Dwg. 19 of 32</div>	
			Approved: Logistics Manager. _____ Date _____	Approved: Interior Designer _____ Date _____	Approved: Safety Officer _____ Date _____	Approved: M&R Foreman _____ Date _____	Approved: Eng. Project Supervisor _____ Date _____	Building No. 76	Checked WLM		Drawn MMF
			Approved: Infection Control Mgr. _____ Date _____	Approved: Info. Sys. _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Industrial Hygienist _____ Date _____		Location BATH, NEW YORK			
			Approved: Chief Security _____ Date _____	Approved: Women's Health Rep _____ Date _____	Approved: Space Owner _____ Date _____	Approved: Associate Director _____ Date _____			Approved: Medical Center Director _____ Date _____		


- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES
- B. RENOVATION NOTATIONS:
 - (R) LOCATION OF RELOCATED DEVICE OR EQUIPMENT
 - (RR) REMOVE AND RELOCATE EXISTING DEVICE OR EQUIPMENT
 - (X) EXISTING DEVICE OR EQUIPMENT TO REMAIN
 - (XR) EXISTING FIRE ALARM DEVICE OR EQUIPMENT THAT HAS BEEN REMOVE
AND REPLACED WITH NEW, RE-USE EXISTING CONDUIT WHENEVER
POSSIBLE.
- C. ALL AREAS SHALL BE CONSIDERED TO BE LAY-IN CEILING UNLESS NOTED
OTHERWISE.
- D. THE CONTRACTOR SHALL BE RESPONSIBLE FOR CUTTING AND PATCHING WALL
AS REQUIRED.
- E. ALL FIRE ALARM CIRCUITING SHALL BE IN EMT CONDUIT, 3/4" MINIMUM.

1. ALL SPRINKLER LOW PRESSURE, TAMPER, AND FLOW SWITCHES ARE EXISTING TO REMAIN. REMOVE EXISTING FIRE ALARM INTERFACE MODULES AND FURNISH AND INSTALL NEW MODULES FOR MONITORING BY NEW SYSTEM.



KEY PLAN

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		ARCHITECT/ENGINEERS:	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. _____ Date _____	Approved: Fire Chief _____ Date _____	Approved: Patient Safety _____ Date _____	Drawing Title FIRE ALARM - THIRD FLOOR PLAN NORTH	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	V.A.	
			Approved: Logistics Manager. _____ Date _____	Approved: Interior Designer _____ Date _____	Approved: Safety Officer _____ Date _____	Approved: M&R Foreman _____ Date _____	Project No. 528A6-14-601				
			Approved: Infection Control Mgr. _____ Date _____	Approved: Info. Sys. _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Industrial Hygienist _____ Date _____					
Revisions	Date	200 Envoy Circle #201, Louisville KY 40299 -- PH: 502.339.8511 -- www.paradigmusa.com	Approved: Chief Security _____ Date _____	Approved: Women's Health Rep _____ Date _____	Approved: Space Owner _____ Date _____	Approved: Associate Director _____ Date _____	Approved: Eng. Project Supervisor _____ Date _____	Building No. 76	Checked WLM	Drawn MMF	DRAWING NO. VAMC-528A6-0012 FA107 Dwg. 20 of 32

A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.

B. RENOVATION NOTATIONS:

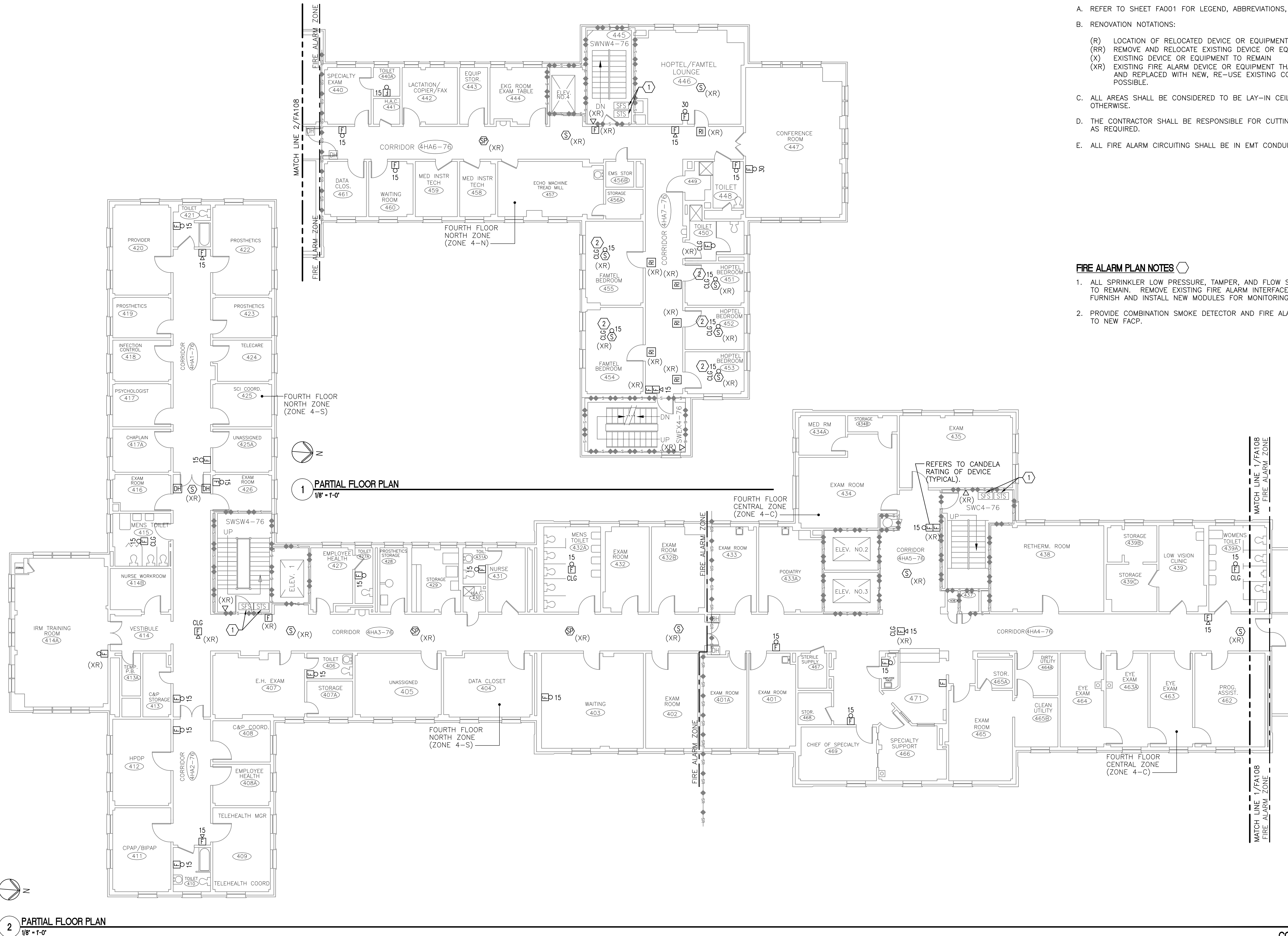
- (R) LOCATION OF RELOCATED DEVICE OR EQUIPMENT
- (RR) REMOVE AND RELOCATE EXISTING DEVICE OR EQUIPMENT
- (X) EXISTING DEVICE OR EQUIPMENT TO REMAIN
- (XR) EXISTING FIRE ALARM DEVICE OR EQUIPMENT THAT HAS BEEN REMOVED AND REPLACED WITH NEW, RE-USE EXISTING CONDUIT WHENEVER POSSIBLE.

C. ALL AREAS SHALL BE CONSIDERED TO BE LAY-IN CEILING UNLESS NOTED OTHERWISE.

D. THE CONTRACTOR SHALL BE RESPONSIBLE FOR CUTTING AND PATCHING WALLS AS REQUIRED.

E. ALL FIRE ALARM CIRCUITING SHALL BE IN EMT CONDUIT, 3/4" MINIMUM.

1. ALL SPRINKLER LOW PRESSURE, TAMPER, AND FLOW SWITCHES ARE EXISTING TO REMAIN. REMOVE EXISTING FIRE ALARM INTERFACE MODULES AND FURNISH AND INSTALL NEW MODULES FOR MONITORING BY NEW SYSTEM.
2. PROVIDE COMBINATION SMOKE DETECTOR AND FIRE ALARM STROBE, CONNECT TO NEW FACP.



PARADIGM
ENGINEERS AND CONSTRUCTORS

Approved: Chief Security	Date
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Approved: Women's Health Rep	Date
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Approved: Space Owner	Date
-----------------------	------

Approved: Associate Director	Date
------------------------------	------

Approved by Medical Center Director Date _____

Location

FA108

Revisions	Date
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A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.

B. RENOVATION NOTATIONS:

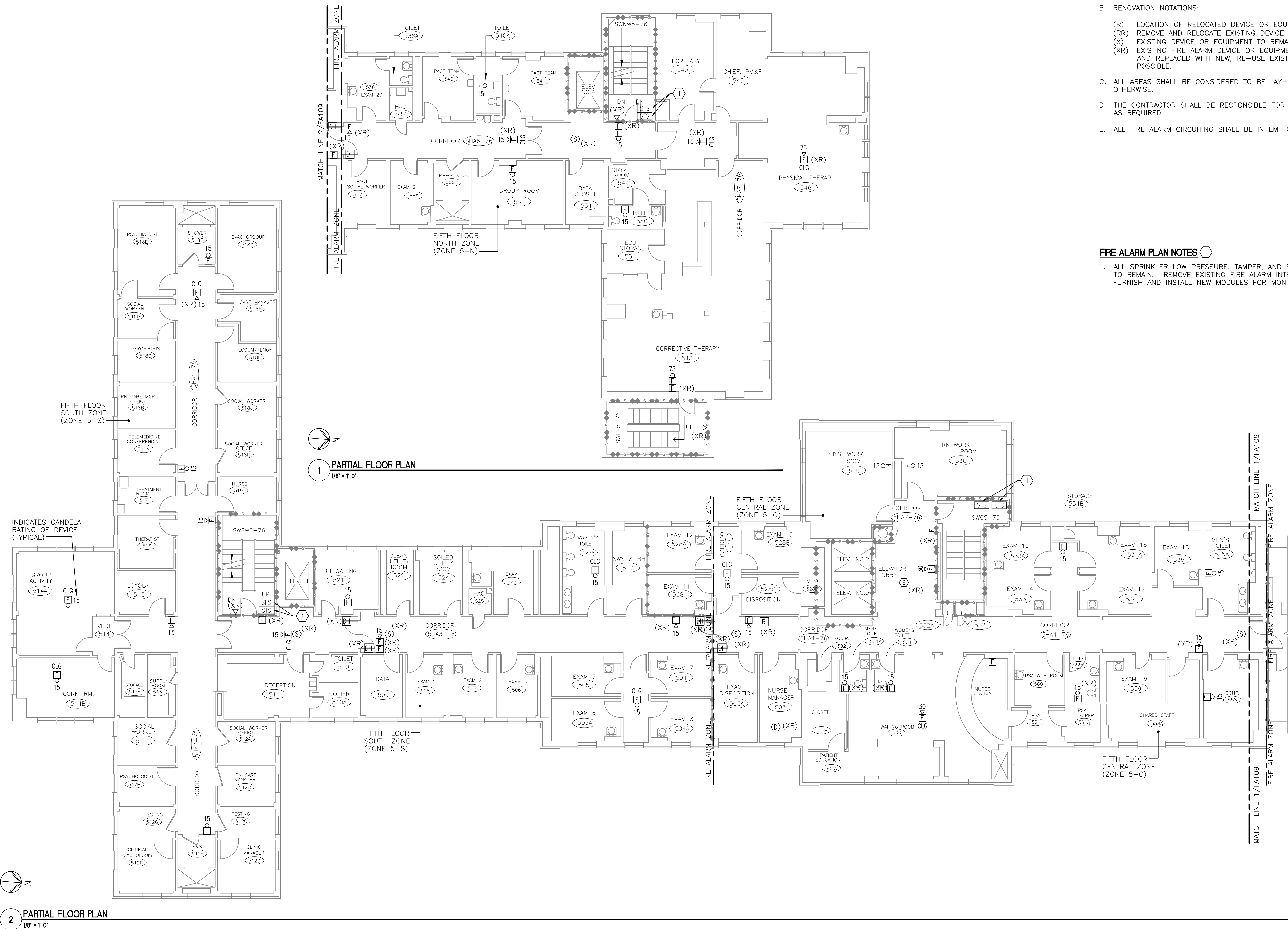
- (R) LOCATION OF RELOCATED DEVICE OR EQUIPMENT
- (RR) REMOVE AND RELOCATE EXISTING DEVICE OR EQUIPMENT
- (X) EXISTING DEVICE OR EQUIPMENT TO REMAIN
- (XR) EXISTING FIRE ALARM DEVICE OR EQUIPMENT THAT HAS BEEN REMOVED AND REPLACED WITH NEW, RE-USE EXISTING CONDUIT WHENEVER POSSIBLE.

C. ALL AREAS SHALL BE CONSIDERED TO BE LAY-IN CEILING UNLESS NOTED OTHERWISE.

D. THE CONTRACTOR SHALL BE RESPONSIBLE FOR CUTTING AND PATCHING WALLS AS REQUIRED.

E. ALL FIRE ALARM CIRCUITING SHALL BE IN EMT CONDUIT, 3/4" MINIMUM.

1. ALL SPRINKLER LOW PRESSURE, TAMPER, AND FLOW SWITCHES ARE EXISTING TO REMAIN. REMOVE EXISTING FIRE ALARM INTERFACE MODULES AND FURNISH AND INSTALL NEW MODULES FOR MONITORING BY NEW SYSTEM.

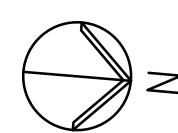


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		<div>ARCHITECT/ENGINEERS:</div> <div><div>PARADIGM</div><div>ENGINEERS AND CONSTRUCTORS</div></div> <div>200 Envoy Circle #201, Louisville KY 40299 -- PH: 502.339.8511 -- www.paradigmausa.com</div>	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. _____ Date _____	Approved: Fire Chief _____ Date _____	Approved: Patient Safety _____ Date _____	Drawing Title FIRE ALARM - FIFTH FLOOR PLAN	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	A. V.		
			Approved: Logistics Manager. _____ Date _____	Approved: Interior Designer _____ Date _____	Approved: Safety Officer _____ Date _____	Approved: M&R Foreman _____ Date _____		Project No. 528A6-14-601				
			Approved: Infection Control Mgr. _____ Date _____	Approved: Info. Sys. _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Eng. Project Supervisor _____ Date _____	Building No. 76	Checked WLM		Drawn MMF	DRAWING NO. VAMC-528A6-0012
Revisions	Date		Approved: Chief Security _____ Date _____	Approved: Women's Health Rep _____ Date _____	Approved: Space Owner _____ Date _____	Approved: Associate Director _____ Date _____	Approved: Medical Center Director _____ Date _____	BATH, NEW YORK	FA109		Dwg. 22 of 32	


E. ALL FIRE ALARM CIRCUITING SHALL BE IN EMT CONDUIT, 3/4" MINIMUM.

7. REPLACE ELEVATOR #4 ALTERNATE FLOOR CONTROL MODULE.



2 PARTIAL FLOOR PLAN
1/8" = 1'-0"

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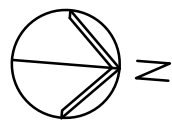
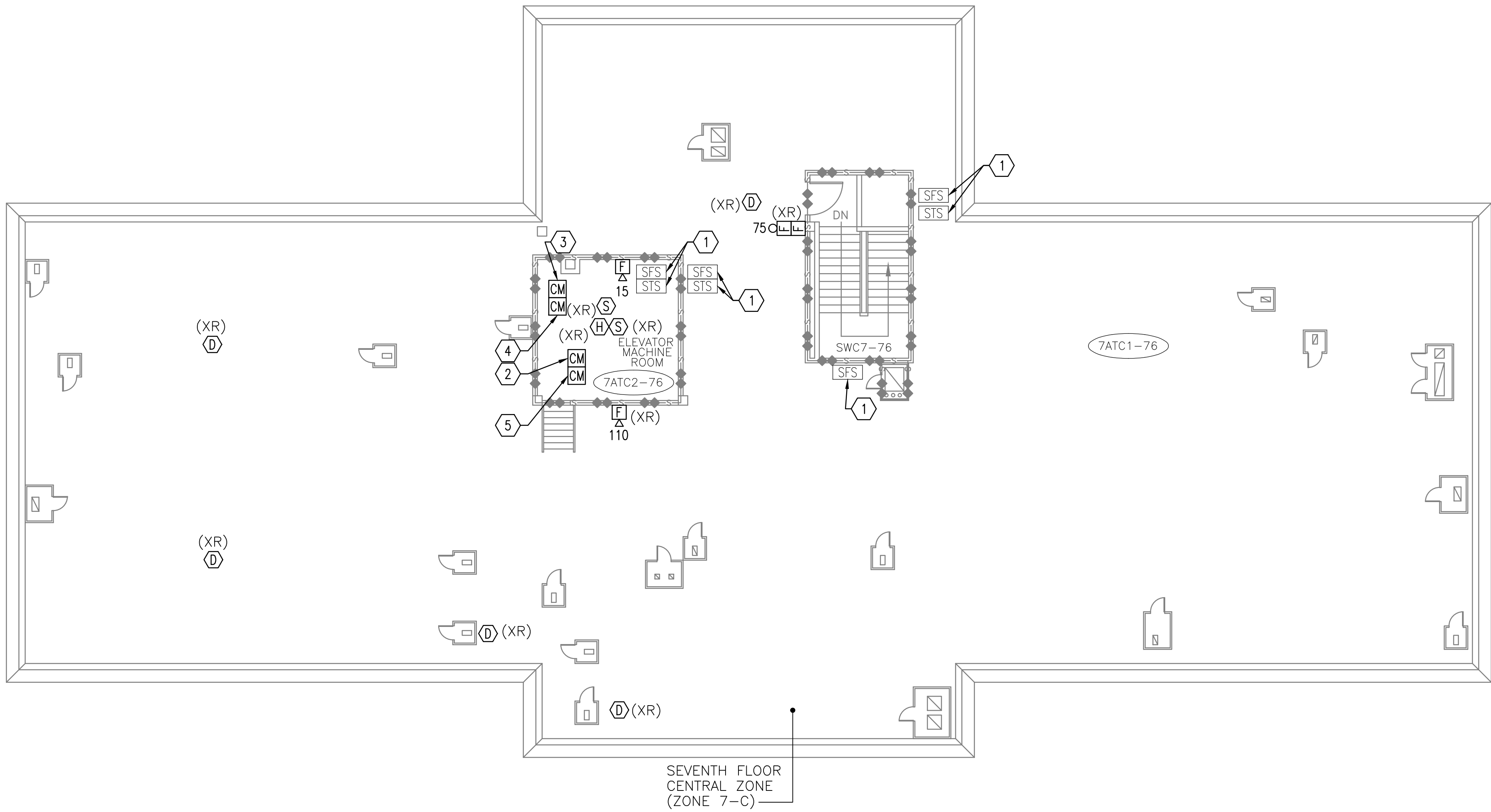
		ARCHITECT/ENGINEERS:	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. _____ Date _____	Approved: Fire Chief _____ Date _____	Approved: Patient Safety _____ Date _____	Drawing Title FIRE ALARM - SIXTH FLOOR PLAN	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	<div>↓</div>		
			Approved: Logistics Manager _____ Date _____	Approved: Interior Designer _____ Date _____	Approved: Safety Officer _____ Date _____	Approved: M&R Foreman _____ Date _____			Project No. 528A6-14-601			
		ENGINEERS AND CONSTRUCTORS	Approved: Infection Control Mgr. _____ Date _____	Approved: Info. Sys. _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Eng. Project Supervisor _____ Date _____	Building No. 76	Checked WLM		Drawn MMF	DRAWING NO. VAMC-528A6-0012
		200 Envoy Circle #201, Louisville KY 40299 – PH: 502.339.8511 – www.paradigmusa.com	Approved: Chief Security _____ Date _____	Approved: Women's Health Rep _____ Date _____	Approved: Space Owner _____ Date _____	Approved: Associate Director _____ Date _____	Approved: Medical Center Director _____ Date _____	Location BATH, NEW YORK	FA110		Dwg. 23 of 32	
Revisions	Date											

GENERAL FIRE ALARM PLAN NOTES

- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
- B. RENOVATION NOTATIONS:
- (R) LOCATION OF RELOCATED DEVICE OR EQUIPMENT
(RR) REMOVE AND RELOCATE EXISTING DEVICE OR EQUIPMENT
(X) EXISTING DEVICE OR EQUIPMENT TO REMAIN
(XR) EXISTING FIRE ALARM DEVICE OR EQUIPMENT THAT HAS BEEN REMOVED AND REPLACED WITH NEW, RE-USE EXISTING CONDUIT WHENEVER POSSIBLE.
- C. ALL AREAS SHALL BE CONSIDERED TO BE LAY-IN CEILING UNLESS NOTED OTHERWISE.
- D. THE CONTRACTOR SHALL BE RESPONSIBLE FOR CUTTING AND PATCHING WALLS AS REQUIRED.
- E. ALL FIRE ALARM CIRCUITING SHALL BE IN EMT CONDUIT, 3/4" MINIMUM.

FIRE ALARM PLAN NOTES

1. ALL SPRINKLER LOW PRESSURE, TAMPER, AND FLOW SWITCHES ARE EXISTING TO REMAIN. REMOVE EXISTING FIRE ALARM INTERFACE MODULES AND FURNISH AND INSTALL NEW MODULES FOR MONITORING BY NEW SYSTEM.
2. REPLACE ELEVATOR #2 SHUTDOWN CONTROL MODULE.
3. REPLACE ELEVATOR #3 SHUTDOWN CONTROL MODULE.
4. REPLACE ELEVATOR #2 AND #3 RECALL CONTROL MODULES.
5. REPLACE ELEVATOR #2 AND #3 ALTERNATE FLOOR CONTROL MODULES.



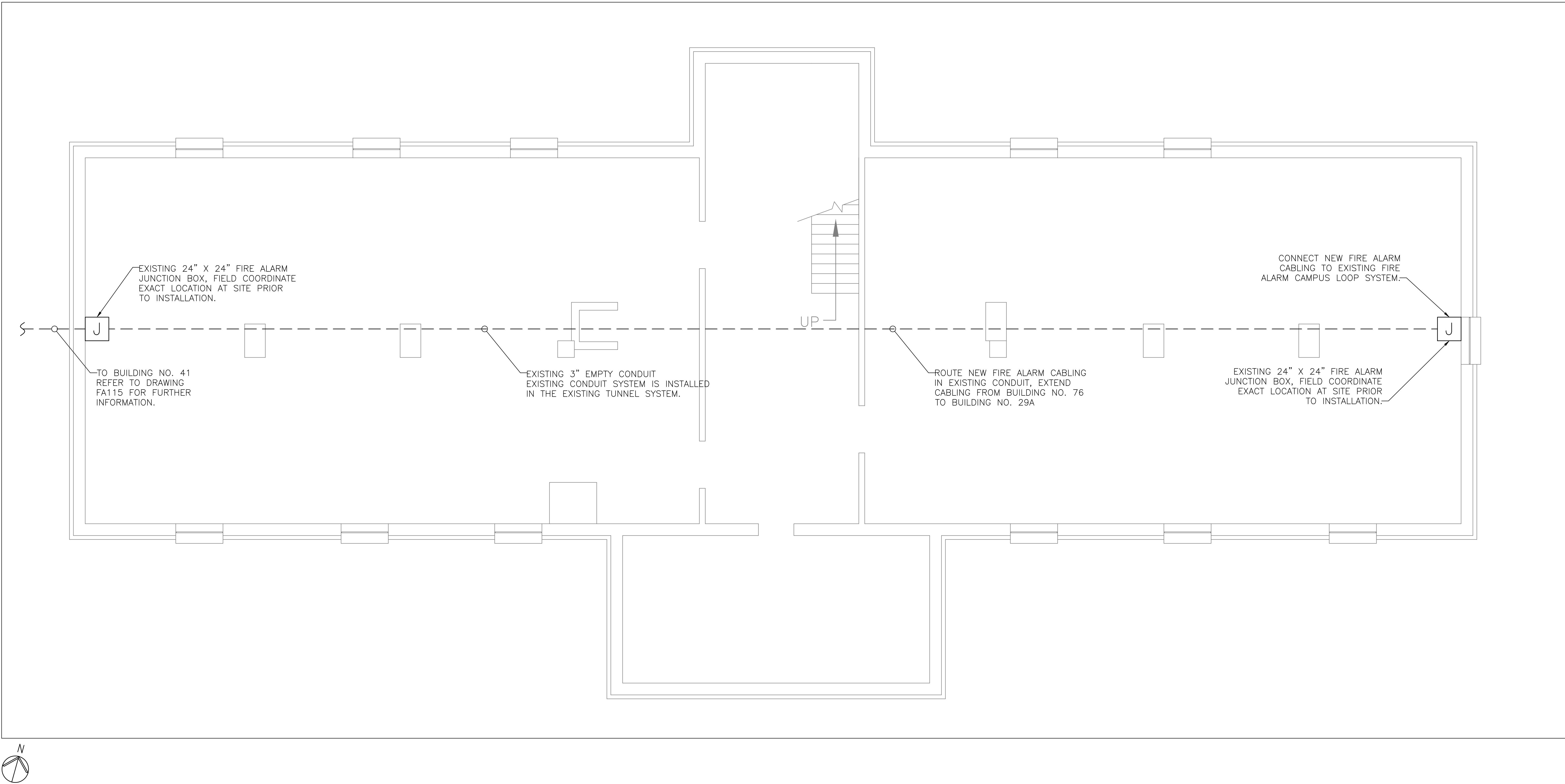
1 FLOOR PLAN
1/8" = 1'-0"

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		ARCHITECT/ENGINEERS:	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. _____ Date _____	Approved: Fire Chief _____ Date _____	Approved: Patient Safety _____ Date _____	Drawing Title FIRE ALARM - SEVENTH FLOOR PLAN	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	V.A.		
		<div><div>PARADIGM</div><div>ENGINEERS AND CONSTRUCTORS</div></div>	Approved: Logistics Manager. _____ Date _____	Approved: Interior Designer _____ Date _____	Approved: Safety Officer _____ Date _____	Approved: M&R Foreman _____ Date _____		Project No. 528A6-14-601				
		200 Envoy Circle #201, Louisville KY 40299 ~ PH: 502.339.8511 ~ www.paradigmusa.com	Approved: Infection Control Mgr. _____ Date _____	Approved: Info. Sys. _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Eng. Project Supervisor _____ Date _____	Building No. 76	Checked WLM		Drawn MMF	DRAWING NO. VAMC-528A6-0012 FA111 Dwg. 24 of 32
			Approved: Chief Security _____ Date _____	Approved: Women's Health Rep _____ Date _____	Approved: Space Owner _____ Date _____	Approved: Associate Director _____ Date _____	Approved: Medical Center Director _____ Date _____	Location BATH, NEW YORK				
Revisions	Date											

GENERAL FIRE ALARM PLAN NOTES

- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
- B. REFER TO SHEET FA115 FOR LOCATION OF BUILDING 29A RELATIVE TO OTHER BUILDINGS.
- C. REFER TO SHEET FA502 FOR INTERCONNECTION SCOPE OF WORK AND MEASUREMENTS.

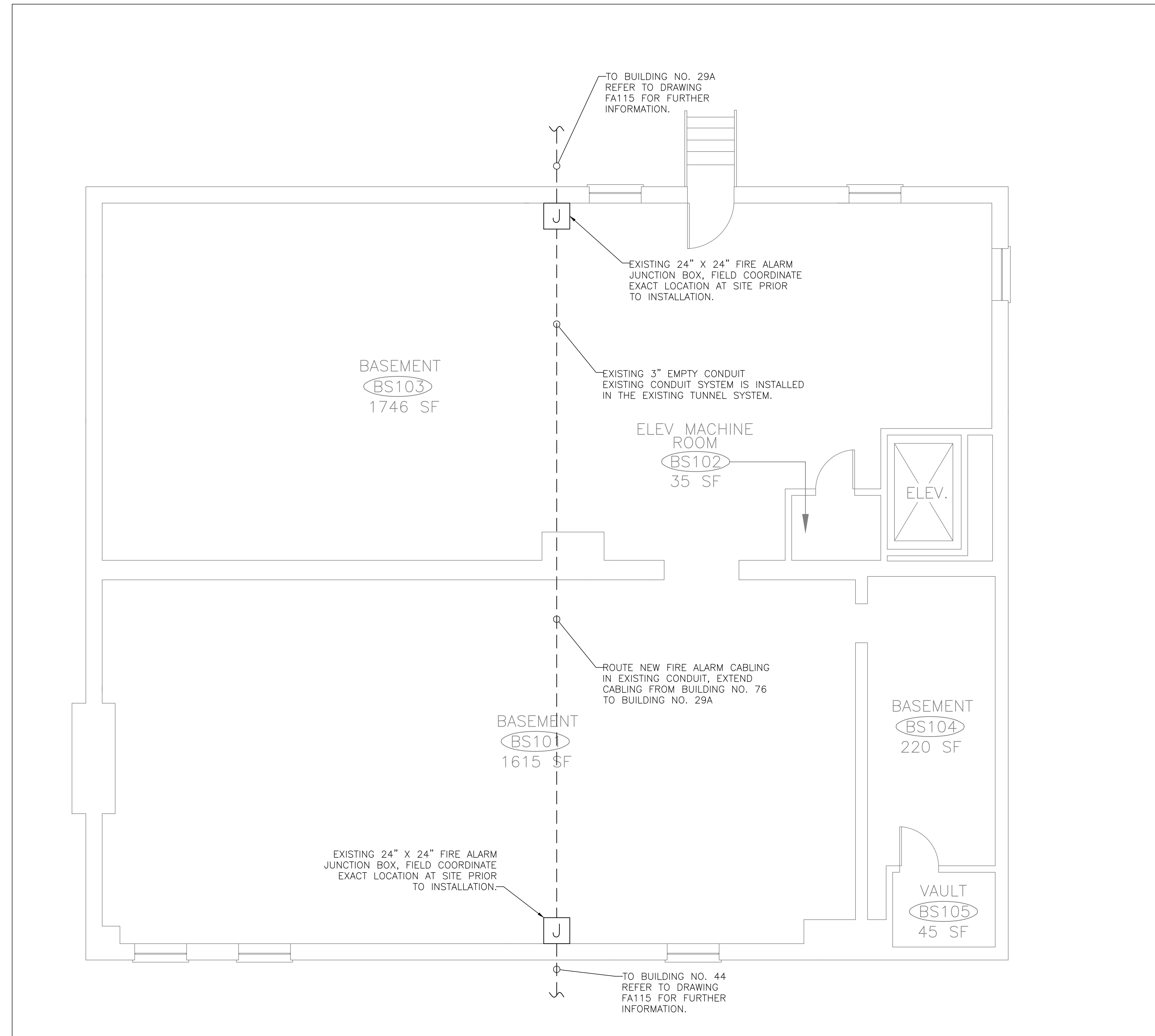


1 BASEMENT FLOOR PLAN - BUILDING 29A
1/4" = 1'-0"

<div>Revisions</div> <div>Date</div>	<div>ARCHITECT/ENGINEERS:</div> <div><div>PARADIGM</div><div>ENGINEERS AND CONSTRUCTORS</div></div> <div>200 Envoy Circle #201, Louisville KY 40299 ~ PH: 502.339.8511 ~ www.paradigmusa.com</div>	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. <div>Date</div>	Approved: Fire Chief <div>Date</div>	Approved: Patient Safety <div>Date</div>	Drawing Title FIRE ALARM BUILDING 29A BASEMENT PLAN	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	<div>•</div> <div>•</div> <div>•</div> <div>•</div>		
		Approved: Logistics Manager. <div>Date</div>	Approved: Interior Designer <div>Date</div>	Approved: Safety Officer <div>Date</div>	Approved: M&R Foreman <div>Date</div>	Approved: Eng. Project Supervisor <div>Date</div>	Building No. 76	Checked WLM		Drawn MMF	DRAWING NO. VAMC-528A6-0012
		Approved: Infection Control Mgr. <div>Date</div>	Approved: Info. Sys. <div>Date</div>	Approved: Industrial Hygienist <div>Date</div>	Approved: Industrial Hygienist <div>Date</div>	Approved: Medical Center Director <div>Date</div>	Location BATH, NEW YORK	FA112		Dwg. 25 of 32	
		Approved: Chief Security <div>Date</div>	Approved: Women's Health Rep <div>Date</div>	Approved: Space Owner <div>Date</div>	Approved: Associate Director <div>Date</div>						

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CONSTRUCTION DOCUMENTS
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- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
- B. REFER TO SHEET FA115 FOR LOCATION OF BUILDING 41 RELATIVE TO OTHER BUILDINGS.
- C. REFER TO SHEET FA502 FOR INTERCONNECTION SCOPE OF WORK AND MEASUREMENTS.



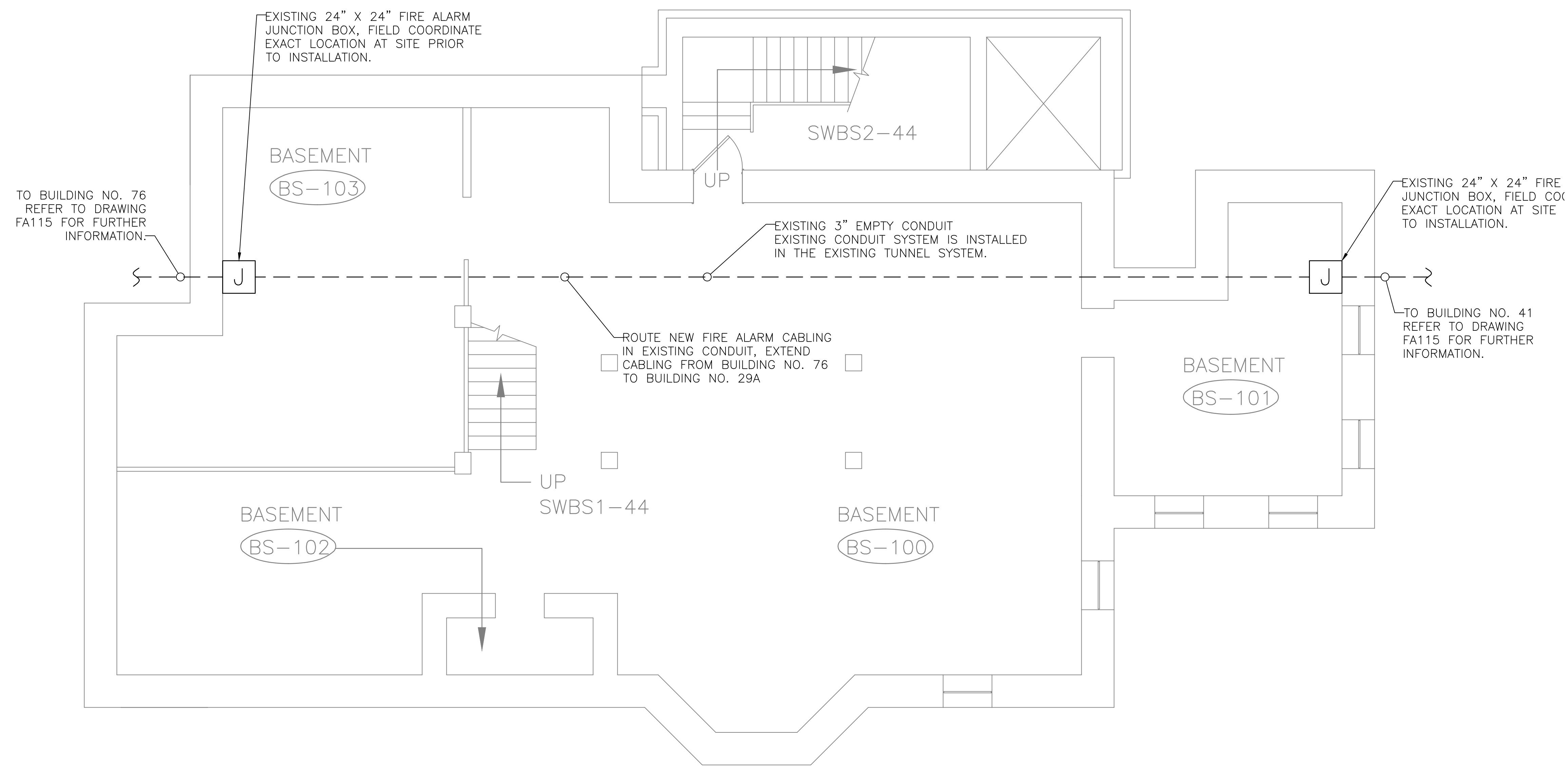
1 BASEMENT FLOOR PLAN - BUILDING 41
1/4" = 1'-0"

FULLY SPRINKLERED
CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION

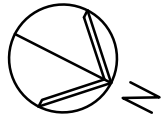
[illegible]

GENERAL FIRE ALARM PLAN NOTES

- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
- B. REFER TO SHEET FA115 FOR LOCATION OF BUILDING 44 RELATIVE TO OTHER BUILDINGS.
- C. REFER TO SHEET FA502 FOR INTERCONNECTION SCOPE OF WORK AND MEASUREMENTS.



1 BASEMENT FLOOR PLAN - BUILDING 44
1/4" = 1'-0"



FULLY SPRINKLERED
CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION

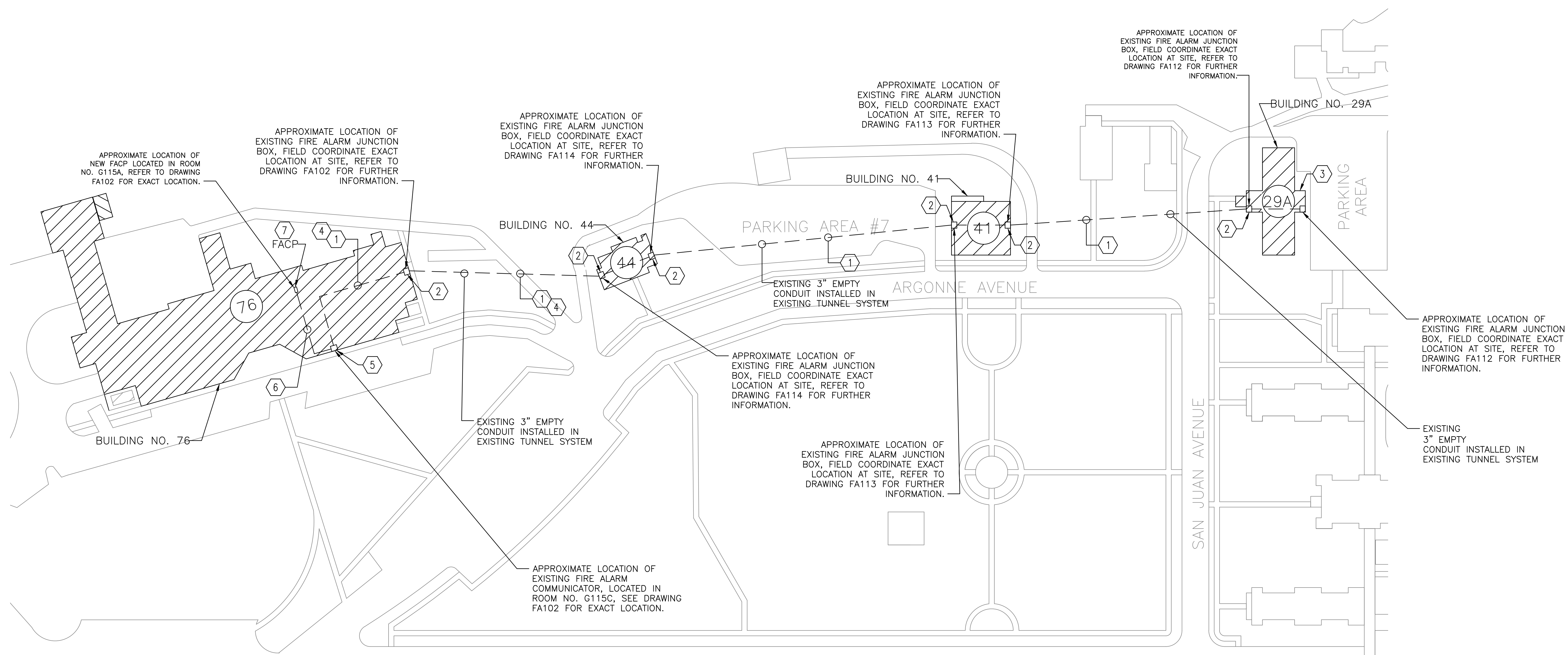
		ARCHITECT/ENGINEERS: <div><div>PARADIGM</div><div>ENGINEERS AND CONSTRUCTORS</div></div> <div>200 Envoy Circle #201, Louisville KY 40299 ~ PH: 502.339.8511 ~ www.paradigmusa.com</div>	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.		Approved: A.F.G.E.	Date	Approved: Fire Chief	Date	Approved: Patient Safety	Date	Drawing Title FIRE ALARM BUILDING 44 BASEMENT PLAN	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014		Project No. 528A6-14-601	DRAWING NO. VAMC-528A6-0012 FA114 Dwg. 27 of 32	V.A.						
			Approved: Logistics Manager.		Date	Approved: Interior Designer		Date	Approved: Safety Officer				Date	Approved: M&R Foreman				Date	Project No. 528A6-14-601				
			Approved: Infection Control Mgr.		Date	Approved: Info. Sys.		Date	Approved: Industrial Hygienist				Date	Approved: Industrial Hygienist				Date	Building No. 76		Checked WLM	Drawn MMF	
			Approved: Chief Security		Date	Approved: Women's Health Rep		Date	Approved: Space Owner				Date	Approved: Associate Director				Date	Approved: Medical Center Director		Date	Location BATH, NEW YORK	

GENERAL FIRE ALARM PLAN NOTES

- B. REFER TO SHEET FA502 FOR INTERCONNECTION SCOPE OF WORK AND MEASUREMENTS.

FIRE ALARM PLAN NOTES

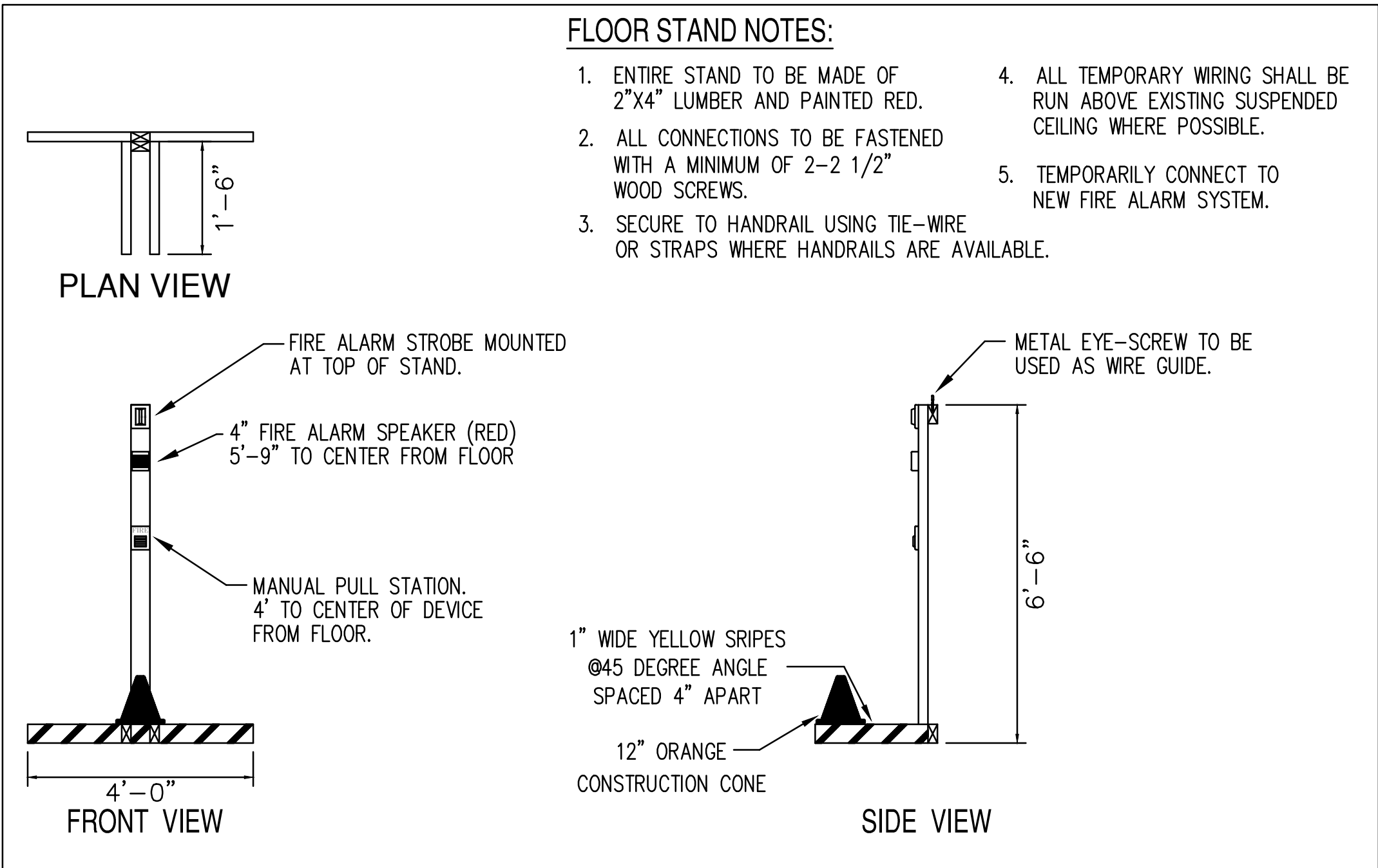
1. ADD NEW FIRE ALARM CIRCUITING IN EXISTING 3" EMPTY STEEL CONDUIT LOCATED ON THE GROUND FLOOR, COORDINATE WIRE TYPE AND INSULATION TYPE WITH FIRE ALARM VENDOR PRIOR TO BID AND INSTALLATION, ROUTE F/A CABLEING TO EXISTING CAMPUS LOOP TIE-IN IN BUILDING 29A.
2. EXISTING FIRE ALARM JUNCTION BOX, PULL FIRE ALARM CABLEING TO EACH JUNCTION BOX AND EXTEND F/A CIRCUITING TO CAMPUS LOOP FIRE ALARM CIRCUIT IN BUILDING 29A.
3. CONNECT NEW FIRE ALARM CABLEING TO EXISTING FIRE ALARM CAMPUS LOOP SYSTEM IN BUILDING 29A.
4. REMOVE EXISTING FIRE ALARM CABLEING FROM BUILDING 76 TO BUILDING 44. PROVIDE NEW F/A CABLEING IN ITS PLACE.
5. CONNECT NEW FIRE ALARM CIRCUITING TO EXISTING FIRE ALARM COMMUNICATOR LOCATED IN ROOM NO. G115C, REFER TO DRAWING FA102 FOR FURTHER INFORMATION.
6. ROUTE 2" EMPTY CONDUIT FROM EXISTING FIRE ALARM COMMUNICATOR TO JUNCTION BOX AND OVER TO NEW FACP LOCATED IN ROOM NO. G115A, REFER TO DRAWING FA102 FOR EXACT LOCATION.
7. EXTEND NEW FIRE ALARM CIRCUITING TO NEW FACP, REFER TO DRAWING FA102 FOR EXACT LOCATION OF FACP.



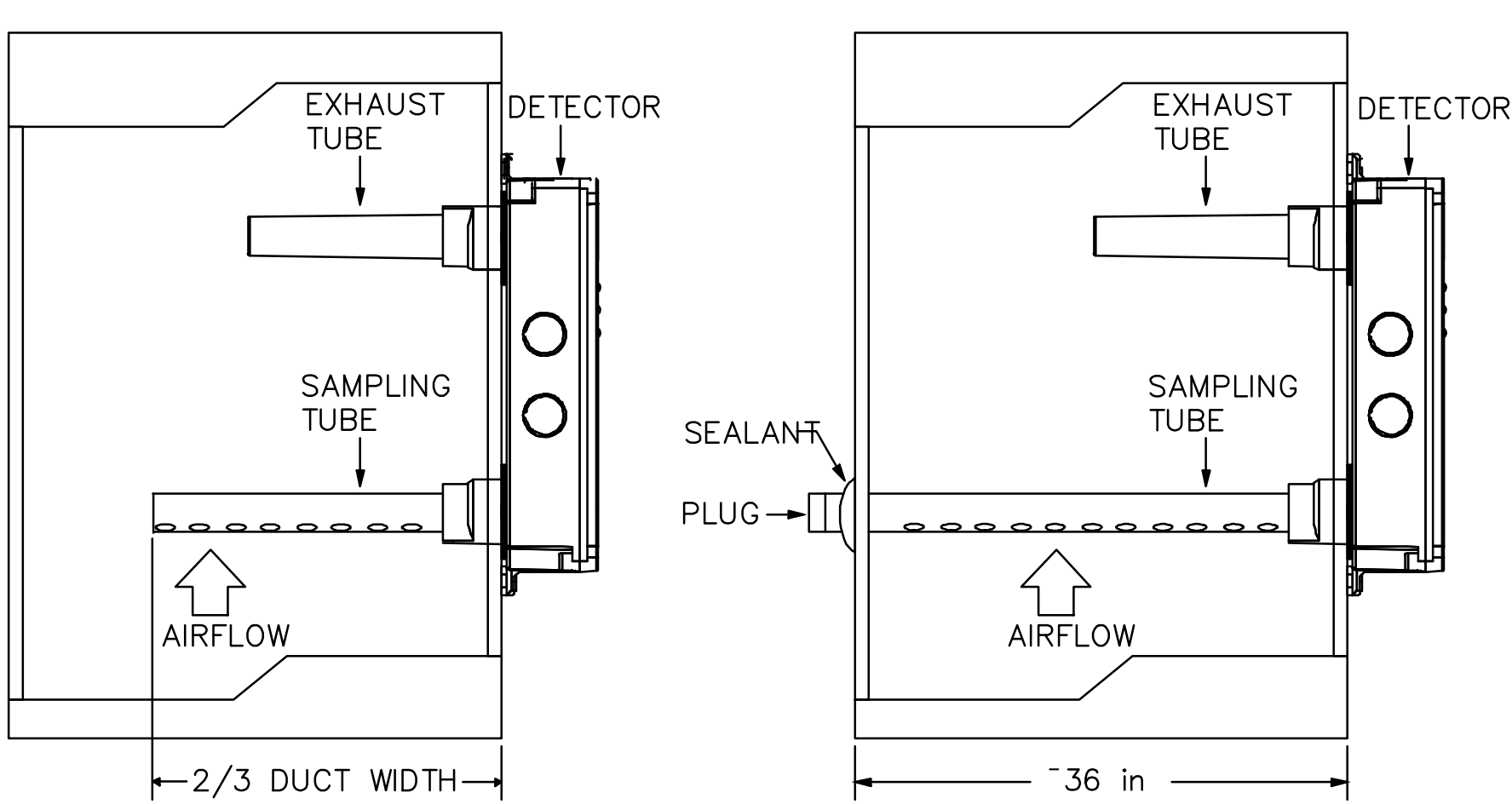
1 FIRE ALARM PARTIAL SITE PLAN
NTS

FULLY SPRINKLERED
CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION

<div>Revisions</div> <div>Date</div>	<div>ARCHITECT/ENGINEERS:</div> <div><div>PARADIGM</div><div>ENGINEERS AND CONSTRUCTORS</div></div> <div>200 Envoy Circle #201, Louisville KY 40299 - PH: 502.339.8511 - www.paradigmusa.com</div>	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. <div>Date</div>	Approved: Fire Chief <div>Date</div>	Approved: Patient Safety <div>Date</div>	Drawing Title FIRE ALARM PARTIAL SITE PLAN	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	<div>Project No. 528A6-14-601</div> <div>DRAWING NO. VAMC-528A6-0012</div> <div>FA115</div> <div>Dwg. 28 of 32</div>	
		Approved: Logistics Manager. <div>Date</div>	Approved: Interior Designer <div>Date</div>	Approved: Safety Officer <div>Date</div>	Approved: M&R Foreman <div>Date</div>	Approved: Eng. Project Supervisor <div>Date</div>	Building No. 76	Checked WLM		Drawn MMF
		Approved: Infection Control Mgr. <div>Date</div>	Approved: Info. Sys. <div>Date</div>	Approved: Industrial Hygienist <div>Date</div>	Approved: Industrial Hygienist <div>Date</div>	Approved: Medical Center Director <div>Date</div>	Location BATH, NEW YORK			
		Approved: Chief Security <div>Date</div>	Approved: Women's Health Rep <div>Date</div>	Approved: Space Owner <div>Date</div>	Approved: Associate Director <div>Date</div>					



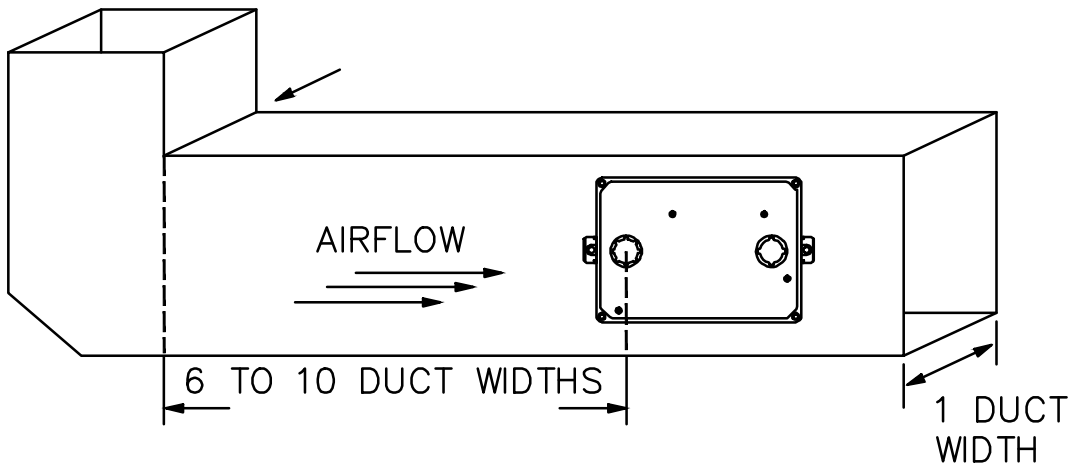
4 TEMPORARY FIRE ALARM STATION DETAIL
NOT TO SCALE



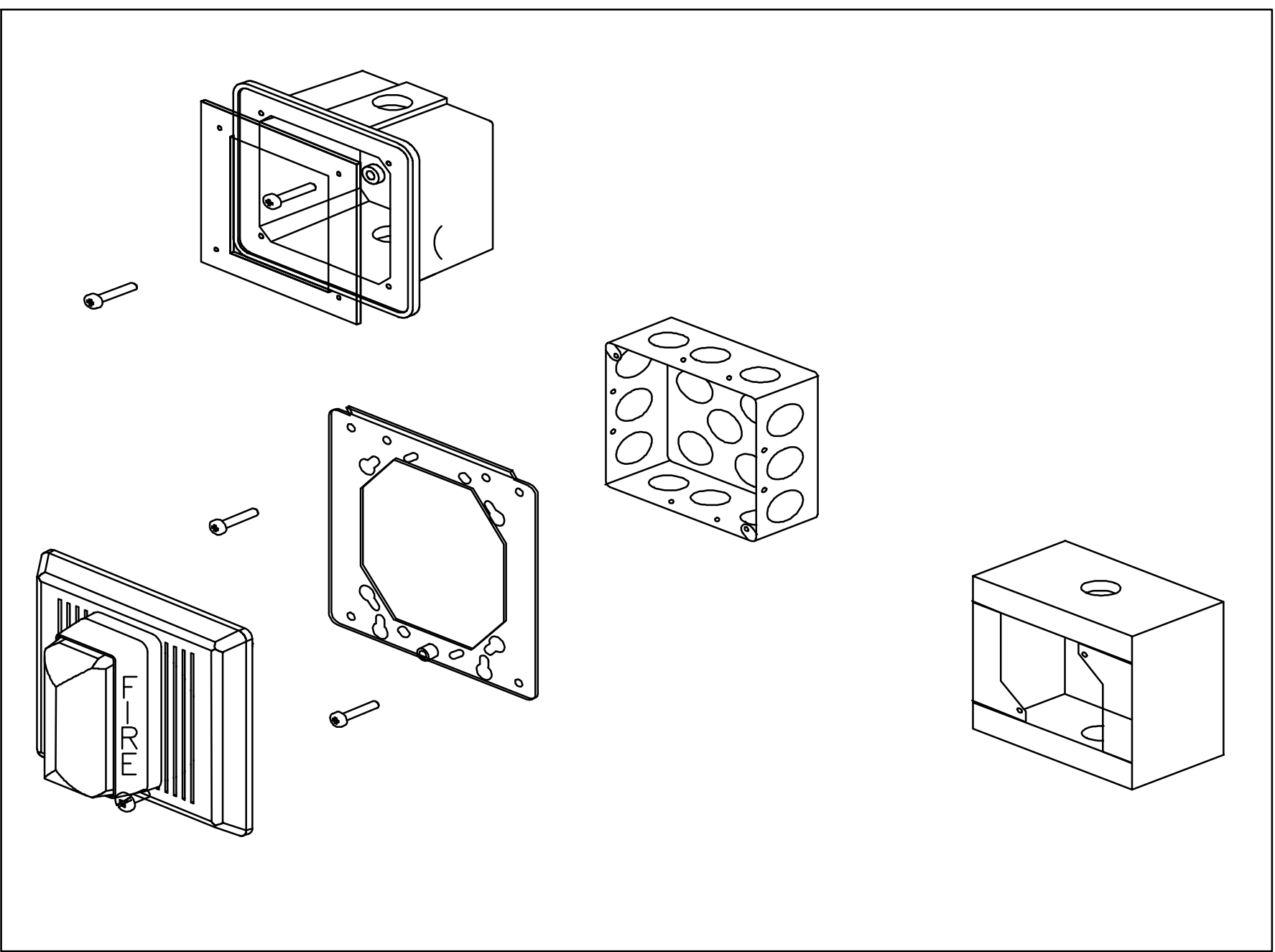
DUCT SMOKE DETECTORS SHALL BE MOUNTED SO THAT THE SAMPLE TUBE IS POSITIONED 6 TO 10 DUCT-WIDTHS FROM ANY BEND OR OBSTRUCTION.

SAMPLING TUBE SHALL EXTEND NO LESS THAN TWO-THIRDS OF THE WAY INTO THE DUCT, AND SHALL BE SUPPORTED ON BOTH ENDS IN DUCTS WITH A WIDTH GREATER THAN 36 INCHES.

PROVIDE EMT CONDUIT (3/4" MINIMUM) BACK TO FIRE ALARM CONTROL PANEL.



2 DUCT SMOKE DETECTOR INSTALLATION DETAIL
NOT TO SCALE



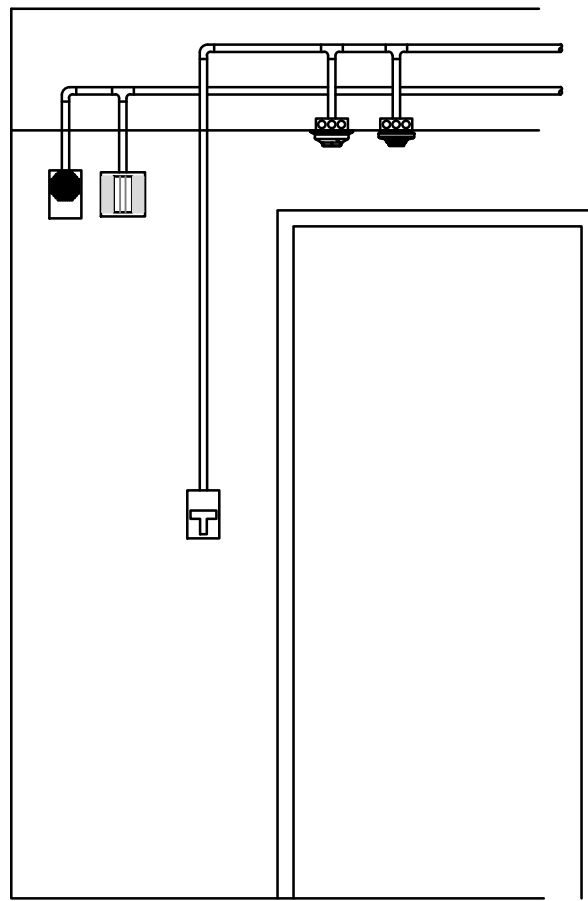
1 HORN / STROBE MOUNTING DETAIL
NOT TO SCALE

MANUAL PULL STATIONS SHALL BE MOUNTED AT 48" A.F.F. PER ADA.

PROVIDE JUNCTION BOX (SIZE AS NEEDED FOR DEVICE) AND EMT CONDUIT (3/4" MINIMUM) BETWEEN DEVICES AND BACK TO FIRE ALARM CONTROL PANEL.

WALL MOUNTED NOTIFICATION APPLIANCES SHALL BE MOUNTED BETWEEN 80" AND 96" A.F.F. PER NFPA 72

CEILING MOUNTED SMOKE AND HEAT DETECTORS SHALL BE INSTALLED IN A CEILING MOUNTED JUNCTION BOX (SIZE AS NEEDED FOR DEVICE) AND SHALL BE LOCATED NO CLOSER THAN 4" TO ANY WALL.



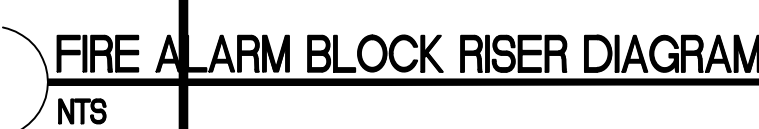
3 MANUAL PULL STATION DETAIL
NOT TO SCALE


FULLY SPRINKLERED
CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION

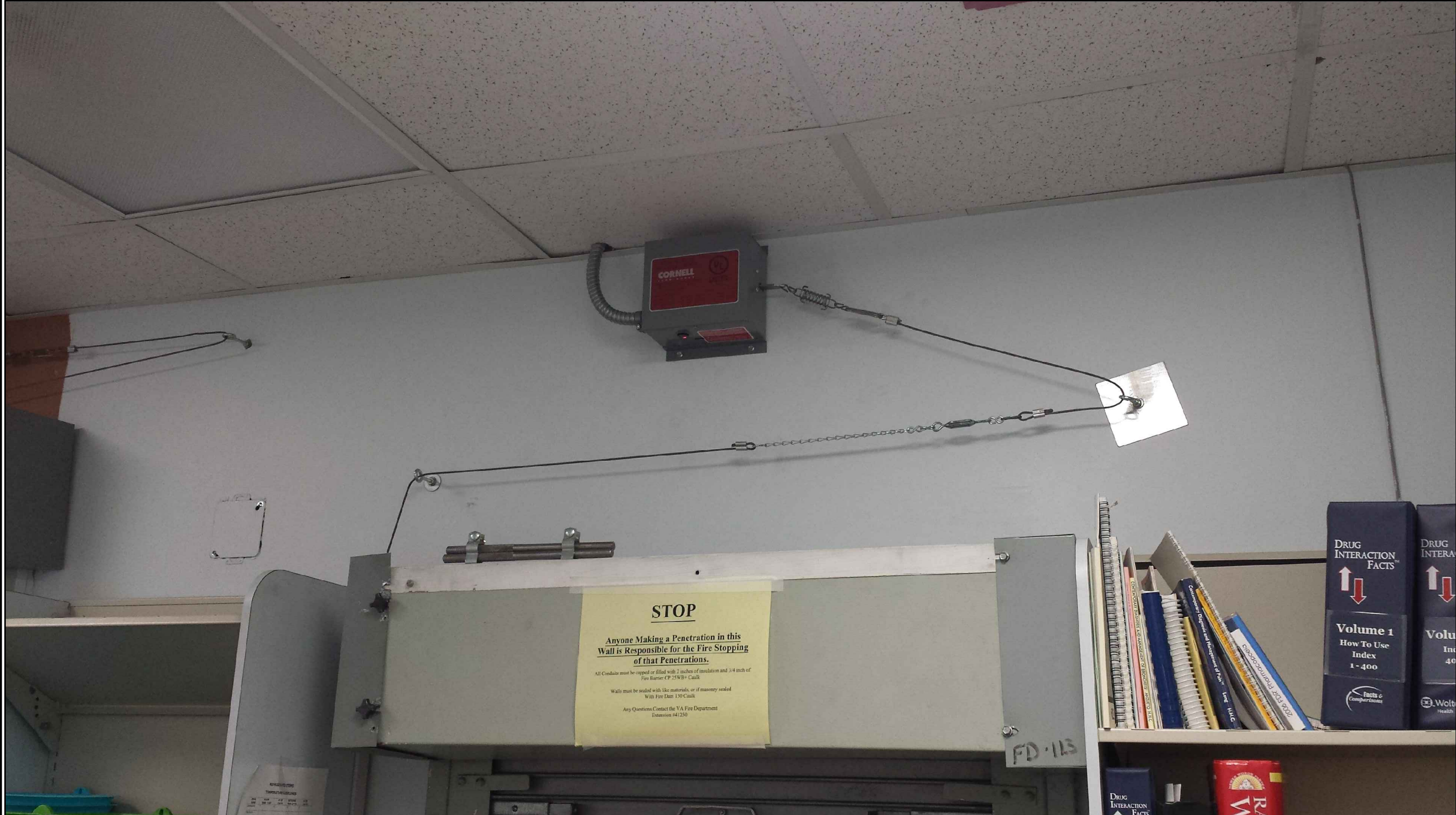
		ARCHITECT/ENGINEERS: <div><div>PARADIGM</div><div>ENGINEERS AND CONSTRUCTORS</div></div> <div>200 Envoy Circle #201, Louisville KY 40299 ~ PH: 502.339.8511 ~ www.paradigmusa.com</div>	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. _____ Date _____	Approved: Fire Chief _____ Date _____	Approved: Patient Safety _____ Date _____	Drawing Title FIRE ALARM DETAILS	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	V.A.
			Approved: Logistics Manager. _____ Date _____	Approved: Interior Designer _____ Date _____	Approved: Safety Officer _____ Date _____	Approved: M&R Foreman _____ Date _____	Approved: Eng. Project Supervisor _____ Date _____	Building No. 76	Checked WLM	
Revisions	Date		Approved: Infection Control Mgr. _____ Date _____	Approved: Info. Sys. _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Associate Director _____ Date _____	Approved: Medical Center Director _____ Date _____	Location BATH, NEW YORK	
			Approved: Chief Security _____ Date _____	Approved: Women's Health Rep _____ Date _____	Approved: Space Owner _____ Date _____					

- A. REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
- B. REFER TO SHEET FA102 FOR FLOOR PLAN OF BUILDING 76
- C. REFER TO SHEETS FA112. FA113. FA114 FOR FLOOR PLANS OF BUILDINGS 29A, 41 AND 44.
- D. REFER TO SHEET FA115 FOR SITE PLAN.

NOTE:
THE FIRE ALARM CONTRACTOR SHALL PROVIDE
NEW FIRE ALARM CABLING FROM BUILDING NO.
76 FACP TO THE EXISTING CAMPUS LOOP FIRE
ALARM CONNECTION IN BUILDING NO. 29A



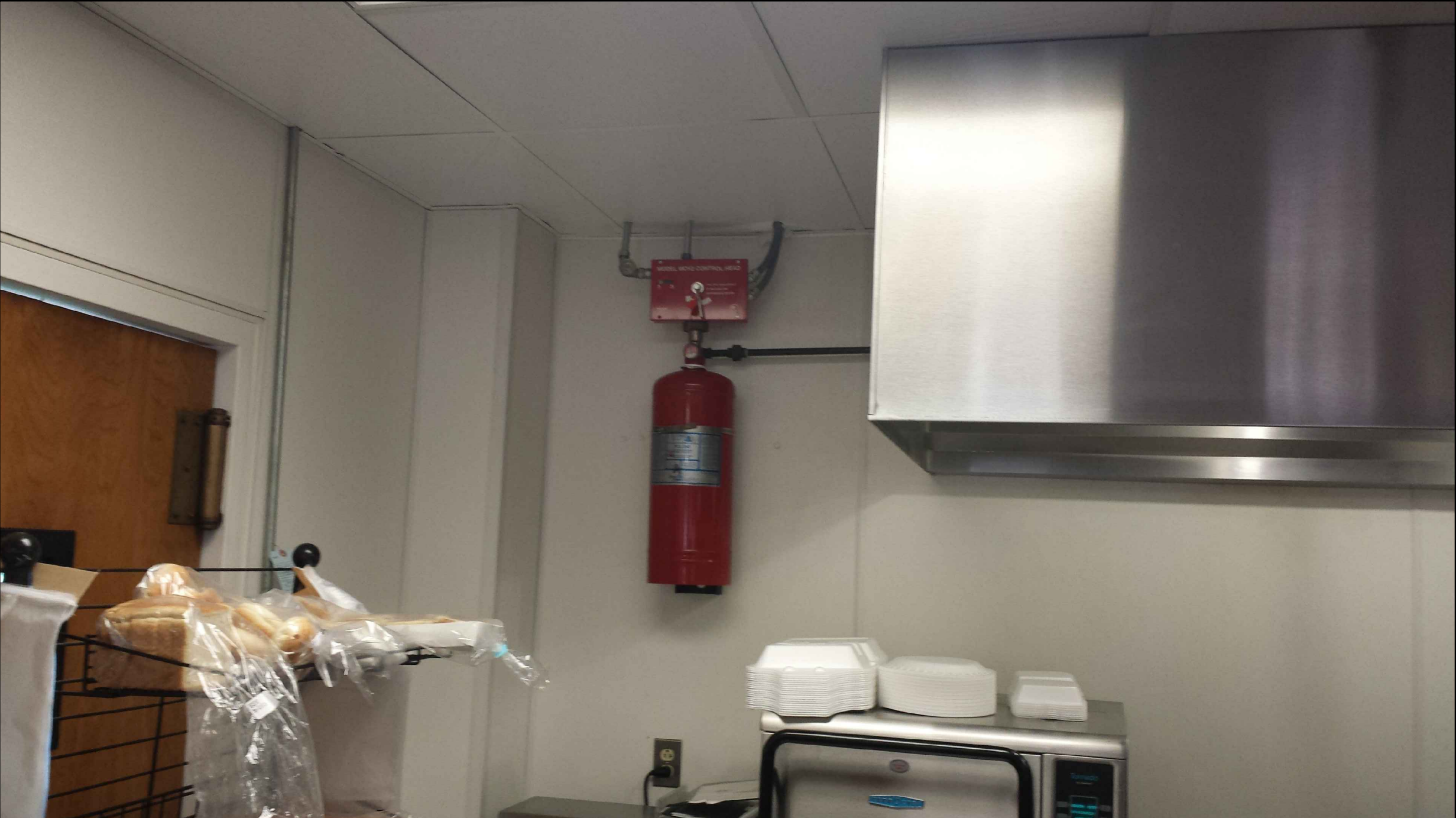
<div> <div>Revisions</div> <div>Date</div> </div>	<div> <div>ARCHITECT/ENGINEERS:</div> <div>  </div> <div>200 Envoy Circle #201, Louisville KY 40299 -- PH: 502.339.8511 -- www.paradigmusa.com</div> </div>	<div>ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.</div>	<div>Approved: A.F.G.E. _____ Date _____</div>	<div>Approved: Fire Chief _____ Date _____</div>	<div>Approved: Patient Safety _____ Date _____</div>	<div>Drawing Title</div> <div>FIRE ALARM BLOCK DIAGRAM</div>	<div>Project Title</div> <div>UPGRADE FIRE ALARM SYSTEM BUILDING 76</div>	<div>Date</div> <div>06-27-2014</div>	<div> <div>Project No.</div> <div>528A6-14-601</div> </div> <div> <div>DRAWING NO.</div> <div>FA502</div> </div> <div> <div>FA502</div> <div>Dwg. 30 of 32</div> </div>	
		<div>Approved: Logistics Manager. _____ Date _____</div>	<div>Approved: Interior Designer _____ Date _____</div>	<div>Approved: Safety Officer _____ Date _____</div>	<div>Approved: M&R Foreman _____ Date _____</div>	<div>Approved: Eng. Project Supervisor _____ Date _____</div>	<div>Building No.</div> <div>76</div>	<div>Checked</div> <div>WLM</div>		<div>Drawn</div> <div>MMF</div>
		<div>Approved: Infection Control Mgr. _____ Date _____</div>	<div>Approved: Info. Sys. _____ Date _____</div>	<div>Approved: Industrial Hygienist _____ Date _____</div>	<div>Approved: Industrial Hygienist _____ Date _____</div>		<div>Location</div> <div>BATH, NEW YORK</div>			
		<div>Approved: Chief Security _____ Date _____</div>	<div>Approved: Women's Health Rep _____ Date _____</div>	<div>Approved: Space Owner _____ Date _____</div>	<div>Approved: Associate Director _____ Date _____</div>					



1 DOOR SHUTTER - REFER TO SHEET FA104
NTS



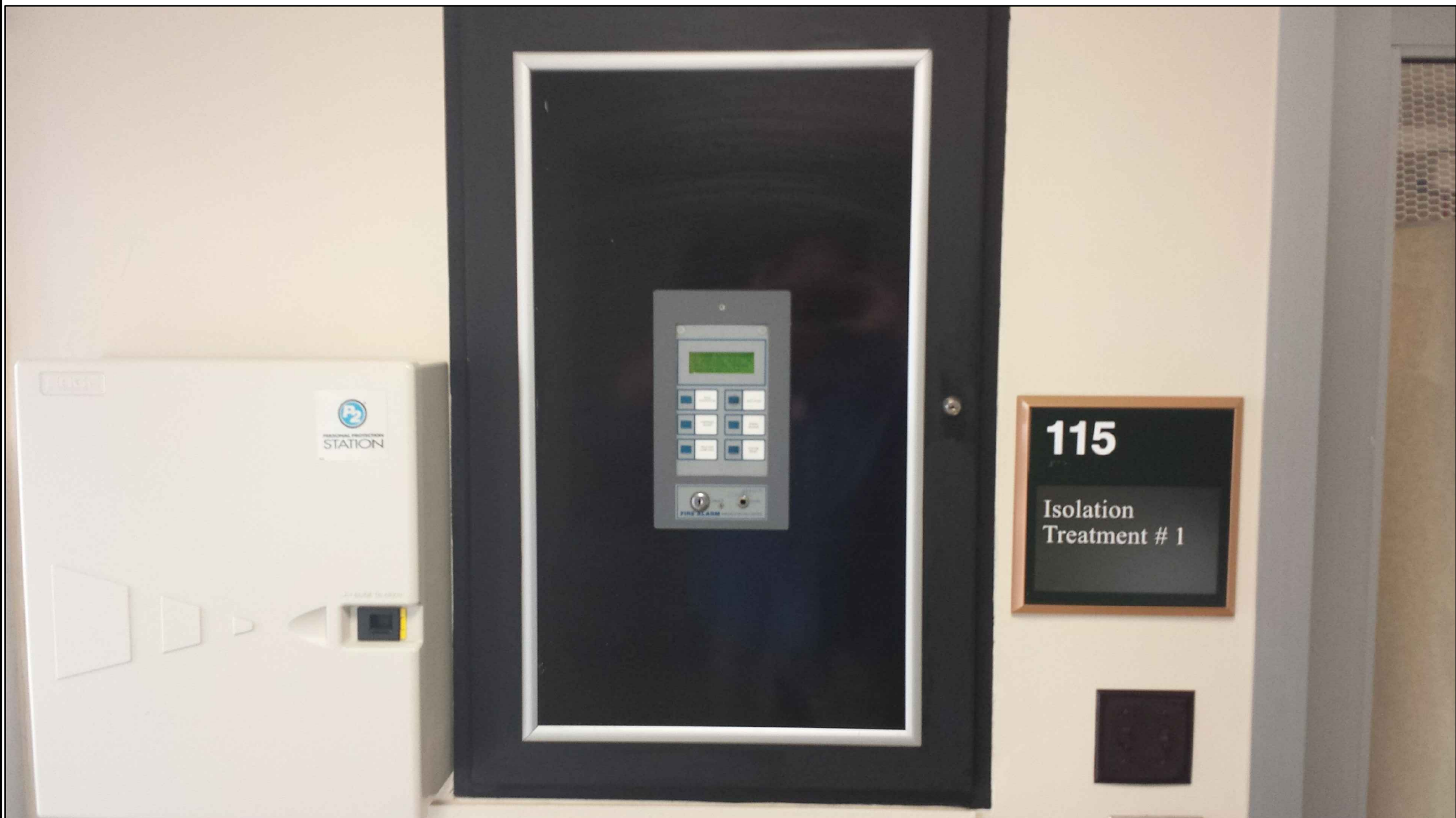
2 FIRE SHUTTER - REFER TO SHEET FA104
NTS



3 KITCHEN ANSUL SYSTEM - REFER TO SHEET FA106
NTS



4 EMERGENCY HANDSET SYSTEM - REFER TO SHEET FA103
NTS



5 EXISTING FAAN - REFER TO SHEET FA103
NTS



6 COMPUTER ROOM - PRE-ACTION PANEL - REFER TO SHEET FA103
NTS



7 KITCHEN ANSUL SYSTEM - REFER TO SHEET FA106
NTS



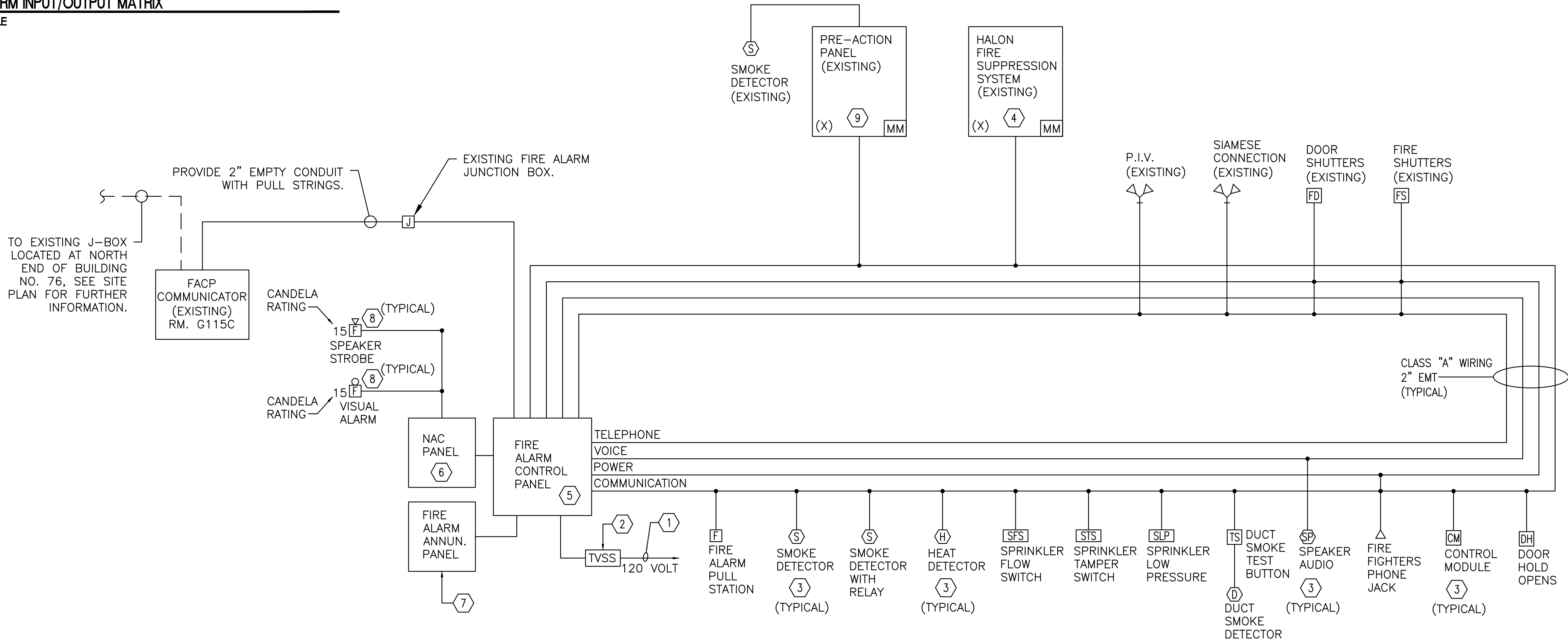
8 KITCHEN ANSUL SYSTEM - PULL STATION - REFER TO SHEET FA106
NTS

<div>Revisions</div>	<div>Date</div>	<div>ARCHITECT/ENGINEERS:</div>	<div>ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.</div>	<div>Approved: A.F.G.E. _____ Date _____</div>	<div>Approved: Fire Chief _____ Date _____</div>	<div>Approved: Patient Safety _____ Date _____</div>	<div>Drawing Title FIRE ALARM PHOTOGRAPHS</div>	<div>Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76</div>	<div>Date 06-27-2014</div>	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div><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FULLY SPRINKLERED
CONSTRUCTION DOCUMENTS
NOT FOR CONSTRUCTION

OUTPUT: INPUT DEVICE:	NOTIFY NECESSARY STAFF FOR RESPONSE FOR HEALTH CARE (ALARM SIGNAL MAYBE DIFFERENT ON DIFFERENT FLOORS).	NOTIFY FIRE DEPARTMENT	INITIATE SUPERVISORY SIGNAL TO A 24 HOUR MANNED POINT FOR IMMEDIATE RESPONSE.	CLOSE ASSOCIATE SMOKE BARRIER DOORS ON THE FLOOR.	CLOSE DAMPERS ON FAN PROXIMATE TO DETECTOR.	SHUT DOWN AIR HANDLER SERVED BY THE DETECTOR.	RECALL ELEVATOR	INITIATE ELEVATOR SHUT DOWN AND DISCONNECT ELEVATOR POWER	OPEN LOCKED EGRESS DOORS ON FLOOR OF FIRE ORIGIN **	DISCONNECT FUEL SOURCE FROM COOKING EQUIPMENT
DUCT SMOKE DETECTOR *			X		X	X				
SMOKE DETECTOR **	X	X							X	
DOOR RELEASE SMOKE DETECTOR *	X	X		X	X				X	
ELEVATOR SMOKE DETECTOR *	X	X					X			
FIRE ALARM PULL STATIONS	X	X		X					X	
ELEVATOR MACHINE ROOM HEAT DETECTOR	X	X						X		
GENERATOR ROOM HEAT DETECTOR	X	X							X	
SPRINKLER WATER FLOW / PRESSURE SWITCH	X	X		X					X	
HIGH / LOW PRESSURE DRY-PIPE SPRINKLER SYSTEM			X							
ANSUL FIRE SUPPRESSION SYSTEM	X	X		X					X	X
SIAMESE CONNECTION	X	X	X	X	X					
POST INDICATOR VALVE	X	X	X	X	X					
DOOR SHUTTER	X	X		X	X					
FIRE SHUTTER	X	X		X	X					
* - WHILE NFPA 101 DOES NOT REQUIRE SOME DETECTORS TO NOTIFY BUILDING OCCUPANTS, VA REQUIRES ALL SMOKE DETECTORS, OTHER THAN DUCT SMOKE DETECTORS , TO NOTIFY BUILDING OCCUPANTS. ONLY INSTALL SMOKE DETECTORS WHEN REQUIRED BY LIFE SAFETY CODE OR ITS REFERENCES.										
** - THOSE DOORS THAT ARE REQUIRED TO BE TIED TO THE FIRE ALARM SYSTEM SUCH AS DELAYED EGRESS AND ACCESSIBLE CONTROLLED DOORS.										

1 FIRE ALARM INPUT/OUTPUT MATRIX
NOT TO SCALE



1 FIRE ALARM RISER DIAGRAMS
NOT TO SCALE

GENERAL FIRE ALARM NOTES

- REFER TO SHEET FA001 FOR LEGEND, ABBREVIATIONS, AND GENERAL NOTES.
- PROVIDE NEW FIRE ALARM SYSTEM AS INDICATED, REFER TO FLOOR PLAN FOR LOCATIONS OF DEVICES, REFER TO FIRE ALARM MATRIX SUMMARY FOR ADDITIONAL INFORMATION.
- FIRE ALARM WIRING SHALL BE STYLE "7", IN 2" EMT, REFER TO DETAIL FOR FURTHER INFORMATION.
- PROVIDE SUFFICIENT COMMUNICATION LOOP CIRCUITS TO SERVE MAXIMUM NUMBER OF ADDRESSES RECOMMENDED BY FIRE ALARM SYSTEM MANUFACTURER PLAN AN ADDITIONAL 50%.
- RENOVATION NOTATIONS:

(X) EXISTING DEVICE OR EQUIPMENT TO REMAIN

FIRE ALARM NOTES

- CONNECT TO EXISTING LIFE SAFETY CIRCUIT FEEDING EXISTING FIRE ALARM CONTROL PANEL, CONNECT TO LOCKED HANDLE CIRCUIT BREAKER WITHIN PANEL, FIELD COORDINATE PRIOR TO INSTALLATION.
- FURNISH AND INSTALL TVSS AS REQUIRED, COORDINATE WITH FIRE ALARM VENDOR PRIOR TO INSTALLATION.
- REFER TO FLOOR PLAN FOR QUANTITY AND LOCATIONS OF DEVICES (TYPICAL).
- EXISTING HALON FIRE SUPPRESSION SYSTEM, ROUTE FIRE ALARM CABLING FROM FIRE HALON FIRE SUPPRESSION PANEL TO NEW FACP AS INDICATED, FURNISH AND INSTALL MONITOR MODULE AT HALON PANEL.
- FURNISH AND INSTALL NEW FIRE ALARM CONTROL PANEL, (FACP) AS INDICATED.
- FURNISH AND INSTALL NEW NAC PANEL AS INDICATED.
- FURNISH AND INSTALL NEW FIRE ALARM ANNUNCIATOR (FAAN) AS INDICATED.
- NOTIFICATION DEVICES, REFER TO FLOOR PLAN FOR QUANTITY AND LOCATIONS OF DEVICES (TYPICAL).
- EXISTING PRE-ACTION FIRE ALARM PANEL LOCATED IN ROOM NO. 152, ADD MONITOR MODULE TO PRE-ACTION PANEL.

Revisions	Date	ARCHITECT/ENGINEERS: PARADIGM ENGINEERS AND CONSTRUCTORS 200 Envoy Circle #201, Louisville KY 40299 ~ PH: 502.339.8511 ~ www.paradigmusa.com	ALL WORK TO BE IN ACCORDANCE WITH N.F.P.A., NATIONAL, STATE AND CITY CODES & O.S.H.A.	Approved: A.F.G.E. _____ Date _____	Approved: Fire Chief _____ Date _____	Approved: Patient Safety _____ Date _____	Drawing Title FIRE ALARM RISER DIAGRAM AND INPUT / OUTPUT MATRIX	Project Title UPGRADE FIRE ALARM SYSTEM BUILDING 76	Date 06-27-2014	F.A. 32	
			Approved: Logistics Manager. _____ Date _____	Approved: Interior Designer _____ Date _____	Approved: Safety Officer _____ Date _____	Approved: M&R Foreman _____ Date _____	Project No. 528A6-14-601				
			Approved: Infection Control Mgr. _____ Date _____	Approved: Info. Sys. _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Industrial Hygienist _____ Date _____	Approved: Eng. Project Supervisor _____ Date _____	Building No. 76	Checked WLM	Drawn MMF	DRAWING NO. VAMC-528A6-0012 FA601 Dwg. 32 of 32
			Approved: Chief Security _____ Date _____	Approved: Women's Health Rep _____ Date _____	Approved: Space Owner _____ Date _____	Approved: Associate Director _____ Date _____	Approved: Medical Center Director _____ Date _____	Location BATH, NEW YORK			